



**State of West Virginia
Agency Master Agreement**

CORRECT ORDER NUMBER
MUST APPEAR ON ALL PACKAGES,
INVOICES, AND SHIPPING PAPERS.
QUESTIONS CONCERNING THIS
ORDER SHOULD BE DIRECTED TO
THE BUYER.

Order Date: 2014-11-26

Order Number: AMA 1300 1300 STO95E	Procurement Folder: 57902
Document Name: Depository Services for Cash Management	Reason for Modification:
Document Description: Depository Services for Cash Management	
Procurement Type: Agency Master Agreement	
Buyer Name:	
Telephone:	
Email:	
Shipping Method: Vendor	Effective Start Date: 2014-07-01
Free on Board: FOB Dest, Freight Prepaid	Effective End Date: 2015-06-30

VENDOR	DEPARTMENT CONTACT
UNITED BANK INC 500 VIRGINIA ST EAST PO BOX 393 CHARLESTON WV 25322 US Vendor Contact Phone: (999) 999-9999 Extension: Discount Percentage: 0.0000 Discount Days: 0	Requestor Name: Shelly Murray Requestor Phone: (304) 341-7089 Requestor Email: shelly.murray@wvsto.com

INVOICE TO	SHIP TO
ACCOUNTS PAYABLE WEST VIRGINIA STATE TREASURERS OFFICE BLDG 1 RM E-145 1900 KANAWHA BLVD E CHARLESTON WV 25305 US	PURCHASING AGENT WEST VIRGINIA STATE TREASURERS OFFICE - CAPITOL BLDG 1 RM E-145 1900 KANAWHA BLVD E CHARLESTON WV 25305 US

DEPARTMENT AUTHORIZED SIGNATURE

SIGNED BY: Shelly Murray

DATE: 2014-11-26

ELECTRONIC SIGNATURE ON FILE

Extended Description:

To extend the original contract according to all terms, conditions, prices, and specifications contained in the original contract and all authorized change orders. This extension shall not exceed twelve (12) months and the contract shall expire on the final date as specified below. No change in contract total.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
1	84120000			EA	\$0.000000

Description: Banking and investment

Extended Description:

Depository Services for Cash Management

Total Order Amount	Open End
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STO95E	Document Phase Final	Document Description Depository Services for Cash Management	Page 3 of 3
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ADDITIONAL TERMS AND CONDITIONS

See attached document(s) for additional Terms and Conditions



State of West Virginia

OFFICE OF THE STATE TREASURER
CHARLESTON, WV 25305
PHONE: 304-558-5000 FAX: 304-558-4097
1-800-422-7498
www.wvtreasury.com

JOHN D. PERDUE
STATE TREASURER

JOSH STOWERS
ASSISTANT STATE TREASURER

November 20, 2014

Larry Salyers, Sr. Vice President
UNITED BANK, Inc.
P.O. Box 393
Charleston, WV 25322-0393

Subject: STO95E

Mr. Salyers,

The West Virginia State Treasurer's Office is offering to renew subject contract under the same terms, conditions and pricing as contained in the original contract including all authorized change orders. The renewal dates are July 1, 2014 through June 30, 2015. If your company agrees to this renewal, please sign below and return the original to my attention at your earliest convenience. Attached is a copy of the Affidavit which is also required to signed, dated, and notarized in order to process the above renewal.

Should you have any questions about this letter, please feel free to give me a call.

Very truly yours,

Jonathan Gency, Purchasing Assistant
West Virginia State Treasurer's Office
Phone: (304) 341 - 0743
Email: Jonathan.Gency@wvsto.com

We agree to renew the contract for the period as stated above under the same terms and conditions in the original purchase order and any change orders thereto.

[Handwritten Signature]
Name/Signature

11/24/14
Date

SVP
Title

STATE OF WEST VIRGINIA
Purchasing Division**PURCHASING AFFIDAVIT**

MANDATE: Under W. Va. Code §5A-3-10a, no contract or renewal of any contract may be awarded by the state or any of its political subdivisions to any vendor or prospective vendor when the vendor or prospective vendor or a related party to the vendor or prospective vendor is a debtor and: (1) the debt owed is an amount greater than one thousand dollars in the aggregate; or (2) the debtor is in employer default.

EXCEPTION: The prohibition listed above does not apply where a vendor has contested any tax administered pursuant to chapter eleven of the W. Va. Code, workers' compensation premium, permit fee or environmental fee or assessment and the matter has not become final or where the vendor has entered into a payment plan or agreement and the vendor is not in default of any of the provisions of such plan or agreement.

DEFINITIONS:

"Debt" means any assessment, premium, penalty, fine, tax or other amount of money owed to the state or any of its political subdivisions because of a judgment, fine, permit violation, license assessment, defaulted workers' compensation premium, penalty or other assessment presently delinquent or due and required to be paid to the state or any of its political subdivisions, including any interest or additional penalties accrued thereon.

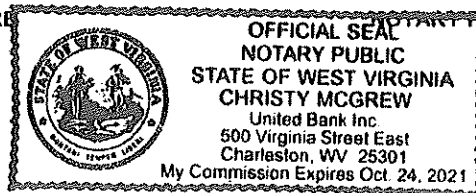
"Employer default" means having an outstanding balance or liability to the old fund or to the uninsured employers' fund or being in policy default, as defined in W. Va. Code § 23-2c-2, failure to maintain mandatory workers' compensation coverage, or failure to fully meet its obligations as a workers' compensation self-insured employer. An employer is not in employer default if it has entered into a repayment agreement with the Insurance Commissioner and remains in compliance with the obligations under the repayment agreement.

"Related party" means a party, whether an individual, corporation, partnership, association, limited liability company or any other form or business association or other entity whatsoever, related to any vendor by blood, marriage, ownership or contract through which the party has a relationship of ownership or other interest with the vendor so that the party will actually or by effect receive or control a portion of the benefit, profit or other consideration from performance of a vendor contract with the party receiving an amount that meets or exceeds five percent of the total contract amount.

AFFIRMATION: By signing this form, the vendor's authorized signer affirms and acknowledges under penalty of law for false swearing (W. Va. Code §61-5-3) that neither vendor nor any related party owe a debt as defined above and that neither vendor nor any related party are in employer default as defined above, unless the debt or employer default is permitted under the exception above.

WITNESS THE FOLLOWING SIGNATURE:Vendor's Name: United Bank, Inc.Authorized Signature: [Signature] Date: 11/24/14State of WVCounty of Kenosha, to-wit:Taken, subscribed, and sworn to before me this 24th day of November, 2014.My Commission expires 10-24, 2021

AFFIX SEAL HERE



[Signature]
Purchasing Affidavit (Revised 07/01/2012)