

Trumann School District

221 N. Pine Avenue, Trumann, AR 72472 Ph: 870-483-6444 Fax: 870-483-2602 www.trumannwildcat.com Superintendent: Mrs. Brandie Williams Assistant Superintendent: Mr. Cody Wallis

"Educating Students for Success in a Changing World"

The Trumann School District is resubmitting requests proposals from area Banks for investment products and services for District funds. The net funds to be deposited will be approximately \$500,000.00 to \$1,500,000.00.

Specifically we are looking for short term investment products (between 3 months and 18 months) that would maximize returns on funds prior to the use of those funds in our facilities and for our students.

Please plan to return this proposal by 9am on February 28th. The Trumann School District Board of Education will review the Administration's recommendation of choice at the March Board Meeting. Funds will then be wired to the selected financial institution by March 15, 2024. All funds must be invested and secured in instruments authorized for school districts in accordance with all state and federal regulatory guidelines.

Please fill out the questions below focused on helping us understand what products your Bank could offer. Provide examples and information with this proposal upon its submission.

If you have previously submitted a Disclosure it remains valid for the current bid.

Thank you!

1.	Bank		
	Contact Name:		
	Address:		
	E-mail		
	Telephone Number_	Fax Number	
2. engaç	Please provide some gement:	e information on your Banking Institutions history, area lo	cations, and civic
3. _ow [Description of propo Duration Bond Accoun	sed investment and the expected yield (i.e. Money Markents):	et, CDs, CDARs,
	*Provide Example		
	a. Propos	sed length of terms for the proposed investment and yield	j :
			-

4.	Description of how the Investment will be collateralized (as required by law):				
	*Provide Example				
5. Charg	Fees: Describe all fees associated with this Investment Proposal including Transaction ges.				
6.	Will there be any penalties for early withdrawal of the Investments?				
7.	Statements issued:				
	MonthlyQuarterlyOther*				
	*Provide Example				

		which the District would ac	Cess its iurius.	
	Provide your standard	form of agreement for servi	ces to be provided.	
	List references, conta	ct person and phone numbe	er:	
	DISTRICT/AGENCY	CONTACT PERSON	PHONE NUMBER	
•	Other comments pertir	nent to this proposal:		
2.	The District reserves the	he right to reject any or all p	roposals and waive any for	malities in

12. The District reserves the right to reject any or all proposals and waive any formalities in proposals received. Yield alone may not be the determining factor. Award will be based upon those considerations, which are in the best interest of the District and will be made to the responsive, responsible Bank whose proposal is judged to be the most effective and economical for the requirements and specifications stated in this proposal. Proposals which fail to comply fully with any provision of what is requested will be considered invalid and will not receive consideration.

13.	Proposals can be mailed or emailed and should be addressed to the undersigned:				
	Ashten Black				
	Chief Financial Officer				
	Trumann School District				
	221 N Pine Ave				
	Trumann AR 72472				
	ashten.black@trumannwildcat.com				
14. packe	All proposals must have a completed Disclose form. The form is included in this proposal et.				
15.	Late proposals will not be considered under any circumstances.				
16. By submitting a proposal, the Bank represents and warrants that no director or employee of the District is in any manner interested directly or indirectly in the proposal or contract which may result from the proposal or in any of the expected profits which might arise therefrom; further, that no attempt has been made to influence or gain favorable advantage by communicating directly or indirectly with any official of the Trumann Public School District. It is understood that any action taken which might tend to degrade the integrity of the competitive proposal process will be considered as grounds for disqualification or a breach of this contract.					
	Completed by:				
	Title:				
	Signature:				

Failure to sign the proposal will result in disqualification. The person signing the proposal should show title or authority to bind his/her firm to a contract. Signature must be in ink. Proposals must be typed.

NOTE: Complete the Disclosure form on the next page.

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1.	Does any school board member or employee of the school district have a financial				
interes	st in your business or hold a position as offic	er, direc	or, trustee, partn	er, or other	
top lev	vel management?Yes	No			
2.	Does any school board member or emplo	yee of the	e school district h	ave a family	
relatio	nship with anyone employed by your busine	ess?	Yes	No	
(If the	answer is yes to either of the above question	ns, provi	de details in a se	parate attachment to	
this for	rm.)				
3. bid spe	Did you or your company assist the schoecifications?Yes		or any agent of t	he school district with	the development of the
If yes:					
a.	Were you or your company compensated	?	Yes	No	
b.	Is your company's name or identity includ	ed anywl	nere within the sp	ecifications?	
	YesNo				
C.	Were you offered any preferential treatme	Were you offered any preferential treatment in the bid evaluation process?			
	YesNo				
		_		 	
Signature			Date		
		_			
Name			Title		
Compa	any				
Subsci	ribed and sworn to before me thisday	of	, 20		
Notary	Public				

This Form is required by Arkansas Code 6-21-304

Any person determined to have made a false statement on the form or any acts contrary to the provisions of the form after its agent has executed the form shall be guilty of a Class C misdemeanor.