

Government of the District of Columbia
ADVISORY NEIGHBORHOOD COMMISSION 3F
Van Ness • North Cleveland Park • Wakefield • Forest Hills

3F01 – David Dickinson
3F02 – Shirley Adelstein, Treasurer
3F03 – Naomi Rutenberg
3F04 – Deirdre P Brown
3F05 – Andrea Molod, Secretary
3F06 – Malachy Nugent, Chair
3F07 – Patrick Jakopchek, Vice Chair



4401-A Connecticut Ave, N.W.
Box 244, Washington, D.C. 20008
commissioners@anc3f.com
www.anc3f.com
202-670-7ANC
Twitter: @ANC3F


RESOLUTION REGARDING the ANC 2017 Security Fund for ANC3F
January 17, 2017

Resolved that this Commission approves the ANC's participation in the Advisory Neighborhood Commission Security Fund and authorizes the Treasurer to pay the \$25 fee for the period January 1, 2017, through December 31, 2017. The Chairperson and Secretary are authorized to execute the attached agreement.


It is understood that: (1) the check for participation in the ANC Security Fund should be made payable to "ANC Security Fund," (2) the ANC is not considered a participant in the Fund until the ANC has received the acceptance section of the agreement which has been signed by the District of Columbia Auditor, and (3) the agreement will not be accepted by the Auditor until all required documents have been received by the Office of the Auditor. The required documents are:

- Resolution
- Agreement
- ANC Check
- Statement of Information – Chairperson
- Statement of Information – Treasurer
- Bank Survey
- Copy of Current Bank Signature Card


ANC 3F approved this resolution at its meeting on January 17, 2017, which was properly noticed and at which a quorum was present, by a vote of 7 in favor, 0 opposed, and 0 abstaining.



Shirley Adelstein
Treasurer, ANC 3F



Malachy Nugent
Chair, ANC 3F



Andrea Molod
Secretary, ANC 3F

**Advisory Neighborhood Commission Security Fund
AGREEMENT FOR CALENDAR YEAR 2017**

In order to comply with the requirements of the D.C. Code, Section 1-309.13 of the Advisory Neighborhood Commissions Act of 1975, as amended, the undersigned Advisory Neighborhood Commission agrees to participate in the Advisory Neighborhood Commission Security Fund.

Advisory Neighborhood Commission (ANC) 3F agrees to contribute the sum of twenty five dollars (\$25), to participate in the Fund for the period January 1, 2017, to December 31, 2017. **Please make checks payable to "The ANC Security Fund."**

The Fund shall secure the ANC against misappropriation and negligent losses of funds by the Chairperson and Treasurer of the ANC for unpaid operating expenses that do not exceed the amount of the loss or do not exceed 50 percent of the ANC's Fiscal Year 2016 annual allocation, whichever is less. The Fund, however, shall not be liable for any loss resulting from an expenditure, whether or not legal, that was authorized by vote of the ANC.

Monies from the Fund shall be payable to the ANC only upon written application to the Fund signed by a majority of the members of the ANC and approved by the ANC Security Fund Board of Trustees.

This agreement shall be subject to the guidelines established by the Fund's Board of Trustees.

ADVISORY NEIGHBORHOOD COMMISSION 3F

By Malachy Nugent 1/17/17
Chairperson Date
Shirley Adelstein 1/17/17
Secretary Date

malachy nugent, Chairperson and Shirley Adelstein, Treasurer, of the above ANC consent to participation in the Advisory Neighborhood Commission Security Fund and agree to be personally liable to the Fund for any sums paid out by the Fund as a result of my wrongful misappropriation or negligent loss of ANC monies.

Malachy Nugent 1/17/17
Signature of Chairperson Date
Shirley 1/17/17
Signature of Treasurer Date

ACCEPTED: ADVISORY NEIGHBORHOOD COMMISSION SECURITY FUND, _____, 2017.

By _____
Kathleen Patterson
District of Columbia Auditor

3806

ADVISORY NEIGHBORHOOD COMMISSION 3F
DISTRICT OF COLUMBIA GOVERNMENT

4401-A CONNECTICUT AVE NW
SUITE 244
WASHINGTON, DC 20008

15-172/540
121
ID CHECK NUMBER

DATE 1/17/16

\$ 25.00 DOLLARS

PAY TO THE ORDER OF ANC Security Fund

Twenty-five and 00/100



America's Most Convenient Bank

FOR 2017 ANC Security Fund

Signature: Steven R. A.

⑆003806⑆ ⑆054001725⑆ 4283171591⑆

Security Features Available on Demand

MEMORANDUM

To: Kathleen Patterson
District of Columbia Auditor

From: Advisory Neighborhood Commission 3F

Subject: Statement of Information – Chairperson, Calendar Year 2017

ANC address: 4401-A Connecticut Ave, NW #244
Washington, DC 20008

ANC telephone number: 202-670-7ANC

The following information is submitted as of January 17, 2017

NAME OF CHAIRPERSON Malachy Nugent

HOME ADDRESS 3632 Appleton St, NW
Washington, DC 20008

BUSINESS ADDRESS (if any) _____

HOME TELEPHONE NUMBER 202-280-9873 (cell)

BUSINESS TELEPHONE NUMBER (if any) _____

E:MAIL ADDRESS (if any) NugentANC3F@gmail.com

1/17/17
Date

Malachy Nugent
Signature of Chairperson

Mail to: Kathleen Patterson
District of Columbia Auditor
Office of the District of Columbia Auditor
717 14th St., N.W., Suite 900
Washington, DC 20005

MEMORANDUM

To: Kathleen Patterson
District of Columbia Auditor
From: Advisory Neighborhood Commission 3F
Subject: Statement of Information – Treasurer, Calendar Year 2017

ANC address: 4401-A Connecticut Ave NW #244
Washington, DC 20008

ANC telephone number: 202-670-7ANC

The following information is submitted as of January 17, 2017

NAME OF TREASURER Shirley Adelstein

HOME ADDRESS 3003 Van Ness St NW #W309
Washington, DC 20008

BUSINESS ADDRESS (if any) _____

HOME TELEPHONE NUMBER 919-637-7370 (cell)

BUSINESS TELEPHONE NUMBER (if any) _____

E:MAIL ADDRESS (if any) 3f02@anc.dc.gov

11/17/17
Date


Signature of Treasurer

Mail to: Kathleen Patterson
District of Columbia Auditor
Office of the District of Columbia Auditor
717 14th Street, N.W., Suite 900
Washington, D.C. 20005

Office of the District of Columbia Auditor
Advisory Neighborhood Commission
Bank Survey

ANC 3F

Calendar Year 2017

ANC's Bank Name: TD Bank

ANC's Bank Contact Person: _____

ANC's Bank Contact Person's Phone #: 202-537-8470

ANC's Bank Mailing Address: 4849 Wisconsin Ave, NW

City/State/Zip Code: Washington, DC 20016

ANC's Bank Routing Number: ~~054001725~~ 054001725

ANC Bank Account Name: _____

A. Checking Account Name

Advisory Neighborhood Commission 3F

B. Savings Account Name

ANC's Bank Account Number: _____

A. Checking Account Number: 426-3171591

B. Savings Account Number: _____

ANC's D.C. Tax I.D. # (should be DC TIN): 53-6001131

ANC's Mailing Address: 4401-A Connecticut Ave, NW #244

City/State/Zip Code: Washington, DC 20008

ANC's Office Phone #: 202-670-7ANC

ANC's E:mail address: commissioner@anc3f.com

ANC Chairperson: Malachy Nugent

ANC Vice-Chairperson: Pat Jakopchek

ANC Treasurer: Shirley Adelstein

ANC Secretary: Andrea Molod

Please list all officers who are signatories on the ANC's bank signature card for calendar year 2017 and attach a copy of the bank signature card and completed verification below.

Calendar Year 2017 Bank Signatories

Malachy Nugent

Shirley Adelstein

Pat Jakopchek

Andrea Molod

BANK VERIFICATION	
Bank Official Signature	<u>[Signature]</u>
Date	<u>01/18/17</u>



BUSINESS ACCOUNT MAINTENANCE

REGION: Washington D.C. (18)

RC #: 5824

ACCOUNT NUMBER:

426 317 1591 IM

BANK REPRESENTATIVE: Travis M Tracy

DATE FORM PRINTED: 01/18/2017

BUSINESS TYPE: Public/Municipal

ADD'L ACCOUNT*:

STATUS: Updating Authorized Signer(s)

ADD'L ACCOUNT*:

* Must have the same titling; if not a separate form must be completed.

BUSINESS NAME / MAILING ADDRESS: Advisory Neighborhood Commission 3f
District of Columbia Government
4401 Connecticut Ave NW Ste 244
Washington, DC 20008

LEGAL ADDRESS: (No PO Boxes)
4401 Connecticut Ave NW Ste 244
Washington, DC 20008
BUSINESS PHONE:

[X] Updated Business Documentation Obtained (ATTACH TO FORM) : General Business Resolution

IMPORTANT INFORMATION

Federal law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account.

If you, the undersigned, as authorized representative(s) of the business named above (the "Accountholder") are personally liable for the Accountholder's obligations with respect to the account (such as the Accountholder's principal(s), owner(s) or guarantor(s)), you hereby authorize the Bank to, from time to time, request consumer reports containing references about you from third parties, such as a consumer reporting agency, in connection with opening and maintaining the account.

This section does not apply to U.S. non-resident aliens. Under penalty of perjury, you, the undersigned certify that:

- 1. The number shown on this form is the Accountholder's correct taxpayer identification number (or the Accountholder is waiting for a number to be issued to the Accountholder); and
2. The Accountholder is not subject to backup withholding because: (a) the Accountholder is exempt from backup withholding, or (b) the Accountholder has not been notified by the Internal Revenue Service (IRS) that the Accountholder is subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified the Accountholder that the Accountholder is no longer subject to backup withholding; and
3. The Accountholder is a U.S. person (including a U.S. resident alien); and
4. The Foreign Account Tax Compliance Act (FATCA) code entered on this form (if any) indicating that the payee is exempt from FATCA reporting, is correct.

The Internal Revenue Service does not require your or the Accountholder's consent to any provision of this document other than the certifications required to avoid backup withholding.
Relationship Consent
[] By checking this box and signing below, you, _____, authorize the Bank to use the balance from _____ (last 4 digits of account number), your personal checking account to meet the balance requirement on the Accountholder's Business Convenience Checking Plus or Business Premier Checking account. See Business Deposit Account Agreement for details.

Authorized Representative(s)/Signers:

Signature: Malachy Nugent
Printed Name: Malachy Nugent

Date of Birth: 07/14/1971
TIN: 146-80-1496

Verification: Verification Completed

If Existing Personal Customer, Enter the RM Number:

Date Signed: 01/18/17

Signature: Shirley Adelshein
Printed Name: Shirley Adelshein

Date of Birth: 8/19/184
TIN: 058-70-0218

Verification: Verification Completed

If Existing Personal Customer, Enter the RM Number:

Date Signed: 1/19/17

Signature: Patrick Jakophck
Printed Name: Patrick Jakophck

Date of Birth: 02/17/1983
TIN: 493-98-5007

Verification: Verification Completed

If Existing Personal Customer, Enter the RM Number:

Date Signed: 1/19/17

Signature: Andren Molod
Printed Name: Andren Molod

Date of Birth: 02/02/1958
TIN: 086-42-2019

Verification: Verification Completed

If Existing Personal Customer, Enter the RM Number:

Date Signed: 1/28/17

GENERAL BUSINESS RESOLUTION

Corporation Limited Liability Co (LLC) Partnership Unincorporated Association Sole Proprietor

Advisory Neighborhood Commission

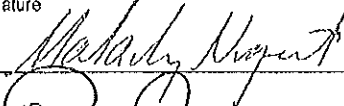

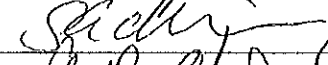
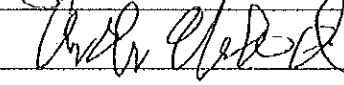
4401 Connecticut Ave NW 244

Washington, DC 20008

Business Name (Including DBA if Applicable)

Address

RESOLVED, that the Financial Institution named above, at any one or more of its offices or branches, be and it hereby is designated as a Financial Institution of and depository for the funds of this Business, which may be withdrawn on checks, drafts, advices of debit, notes or other orders for the payment of monies (including electronic orders) bearing the signature of, or as otherwise authorized by, any one (1) of the following officers, employees, members or agents of this Business ("Agents"), whose actual signatures are shown below:

Print Name	Signature
Malachy Nugent	X 
Patrick Jakophck	X 
Shirley Adelstein	X 
Andrea Molod	X 
	X
	X

FURTHER RESOLVED, that the depositor agrees to be bound by the terms of the applicable Deposit Account Agreement(s), as may be revised or amended from time to time.

FURTHER RESOLVED, that the Financial Institution may honor all such checks and other Instruments for the payment or delivery of money or property when signed as authorized above, regardless of amount, including any payable to the Financial Institution or to any signor or other officer or employees of the corporation or to cash or bearer, and may receive the same in payment of or as security for the personal indebtedness of any signor or other officer or employee or other person to the Financial Institution or in any transaction whether or not known to be for the personal benefit of any such person, without inquiry as to the circumstances of their issue or the disposition of their proceeds, and without liability to the Financial Institution, and with obligation upon the Financial Institution to inquire whether the same be drawn or required for the corporation's business or benefit.

FURTHER RESOLVED, that any one (1) of such Agents is authorized to endorse all checks, drafts, notes and other items payable to or owned by this Business for deposit with the Financial Institution, or for collection or discount by the Financial Institution, and to accept drafts and other items payable at the Financial Institution.

FURTHER RESOLVED, that the Bank is authorized to conduct Debit Card/ATM Card transactions in accordance with Financial Institution's Visa Debit Card Application and Agreement for Businesses.

FURTHER RESOLVED, that the above named agents are authorized and empowered to execute such other agreements, including, but not limited to, special depository agreements and arrangements regarding the manner, conditions or purposes for which funds, checks or items of the Business may be deposited, collected, or withdrawn and to perform such other acts as they deem reasonably necessary to carry out the provisions of these resolutions.

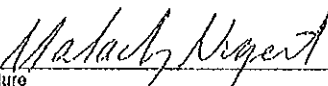
FURTHER RESOLVED, that the authority hereby conferred upon the above named Agents shall be and remains in full force and effect until written notice of the revocation thereof shall have been delivered to and received by the Financial Institution at the location where an account is maintained and Financial Institution has had a reasonable period of time to act upon such notice.

I HEREBY CERTIFY, that the Agents, whose names and signature appear above, are hereby authorized to open and maintain a deposit account or accounts of the Business with the Financial Institution, subject to the terms and conditions in the applicable Account agreement(s), as may be amended from time to time.

I FURTHER CERTIFY that the persons named above occupy the positions set forth opposite their respective names and signatures; that the foregoing resolutions now stand of record on the books of the Business; that they are in full force and effect and have not been modified in any manner whatsoever.

For Corporations, in case the Secretary or other certifying officer is designated by the foregoing resolutions as one of the signing officers, this certificate should also be signed by a second Officer or Director of the Corporation.

Malachy Nugent
Print Name

X 
Signature

CHAIRMAN, ANZ 3F
Title

01/18/17
Date