

**LACKAWANNA SUSQUEHANNA MH/MR MANAGEMENT
REQUEST FOR PROPOSAL**

NOTICE IS HEREBY GIVEN that pursuant to a fair and open process, sealed submissions will be received by the Lackawanna Susquehanna MH/MR Management at its offices at 135 Jefferson Avenue, 3rd floor, Scranton, Pennsylvania 18503, on May 17, 2010 by 4:00 P.M., prevailing time for a Banking Services Proposal.

A. **PURPOSE:** The purpose of this Request for Proposal is to solicit interest from qualified FDIC institutions to provide professional services for Lackawanna Susquehanna MH/MR Management. The qualified institution will be selected through a competitive, quality-based, fair and open process at the sole discretion of the County.

B. **PROCEDURES FOR RESPONDING TO REQUEST FOR QUALIFICATIONS:**

1. Four (4) copies of the submission, inclusive of all information required at Section D hereof, should be provided. Qualifications must be submitted to the Lackawanna Susquehanna MH/MR Management, c/o Steve Arnone, 135 Jefferson Avenue 3rd floor, Scranton, Pennsylvania 18503. Submissions must be submitted in a sealed envelope with the name of the institution submitting the qualifications clearly marked on the outside of the envelope. It is recommended that each submission package be hand-delivered. Lackawanna Susquehanna MH/MR assumes no responsibility for delays in any form of carrier, mail, or delivery service causing the submission to be received after the above-referenced due date and time. Submission by fax, telephone, or email is not permitted. The final selection shall be made in the sole discretion of the Management of Lackawanna Susquehanna MH/MR.
2. All questions regarding this Request for Qualifications should be made in writing to Lackawanna Susquehanna MH/MR, c/o Steve Arnone, 135 Jefferson Avenue 3rd floor, Scranton, Pennsylvania 18503.

C. **CRITERIA FOR EVALUATION OF QUALIFICATIONS:** The Lackawanna Susquehanna MH/MR Management independently evaluates each submission and selection will be made upon the following criteria:

1. Experience and reputation in the field;
2. Knowledge of the subject matter of the services to be provided to Lackawanna Susquehanna MH/MR
3. Knowledge of the Lackawanna Susquehanna MH/MR its affairs and operations;
4. Availability to accommodate any required meetings of the Lackawanna Susquehanna MH/MR Management
5. Compliance with the minimum qualifications established by the Lackawanna Susquehanna MH/MR Management.

6. Other factors determined to be in best interest of the Lackawanna Susquehanna MH / MR Management.
- D. **QUALIFICATION REQUIREMENTS:** The Lackawanna Susquehanna MH/MR Management is requesting qualifications for Banking Services which should include:
1. Scope of Services;
 2. Resume(s);
 3. Facilities; and
 4. Conflict of Interest.

The following explains what the Lackawanna Susquehanna MH/MR Management expects in each of the major sections:

1. **Scope of Services** – The Lackawanna Susquehanna MH/MR Management is requesting qualification statements to provide professional services for Lackawanna Susquehanna MH/MR. Your response should detail the institution's qualifications to provide that type of Banking Service.

The minimum qualifications established by Lackawanna Susquehanna MH/MR for the professional services are as follows:

- Checking general (non payroll):
 - a. The cost of (or absence of) processing an average of 200 checks per month
 - b. The cost of (or absence of) accepting no more than 55 wires per year
 - c. The cost of (or absence of) sending /transferring / wiring funds into the payroll checking account (which will also be held by your institution) no more than 30 times per year.
 - d. The cost if any for on line banking.
 - e. The formula and or rate of interest (if any) on the general checking account described above.
- Checking payroll account:
 - a. The cost of (or absence of) processing an average of 13 monthly payroll checks, 18 monthly employee direct deposit wires, and approximately 70 annual governmental depository wires.
 - b. The cost of (or absence of) accepting no more than 30 transfers / wires from the general checking account which will also be held by your institution.
 - c. The cost if any for on line banking.
 - d. The formula and or rate of interest (if any) on the payroll account described above.
- Money Market:
 - a. The cost of (or absence of) accepting up to 36 wires per year
 - b. The cost of (or absence of) sending up to 36 wires per year.
 - c. The cost if any for on line banking.
 - d. The formula and rate of interest for the account described above maintaining a minimum balance of 500,000,(maximum \$4,000,000)

- Line of Credit
 - a. The cost of a line of credit (interest and fees separate) at \$500,000, \$1,000,000, \$1,500,000, \$2,000,000, up to \$4,000,000 issued in 500,000 increments with your institution holding all three of the above accounts.
 - b. The cost of the above holding just the money market account.
 - c. The cost of the above holding just the checking accounts.

2. **Resume** – All resumes submitted to Lackawanna Susquehanna MH/MR shall include the following:

- a) Name and address of your institution and the corporate officer authorized to execute agreements;
- b) A brief description of your institution's history, ownership, organizational structure, location of its management, and licenses to do business in the Commonwealth of Pennsylvania;
- c) The names, experience, qualifications, and applicable licenses held by the individual primarily responsible for servicing Lackawanna Susquehanna MH/MR and any other person(s), whether as employees or subcontractors, with specialized skills that would be assigned to service Lackawanna Susquehanna MH/MR .
- d) A listing of local government clients with which you have similar contracts; include the name, address and telephone number of the contact person.
- e) A statement of your institution's FDIC and other insurance coverage. Institutions must provide an insurance certificate specific to Lackawanna Susquehanna MH/MR in responding to this RFP.
- f) A statement of assurance to the effect that your institution is not currently in violation of any regulatory rules and regulations that may have any impact on your firm's operations.

3. **Facilities – Office Locations**

- a) For your institution's facilities which will service this project:
 - i. The location;
 - ii. Institution personnel assigned to this location; and
 - iii. Activities of the institution performed at this location.
- b) For those facilities and activities located elsewhere, please explain the activities performed elsewhere and why these are best performed at a different office. Institutions where all activities are performed at one location should clearly indicate there is only one location.

E. **RESERVATION OF RIGHTS:** The Lackawanna Susquehanna MH/MR Management reserves the right to reject any and all submissions, in whole or in

part, and to waive any immaterial defect or informality in any proposal as may be permitted by law.