

City of Richmond Administrative Manual

DEALER QUESTIONNAIRE & CERTIFICATION

1. Name of Firm _____

2. Address

Local	National Headquarters

3. Telephone No. (____) _____ (____) _____

4. Representatives

	Primary Representative	Manager/Partner-in-Charge
Name		
Title		
Phone No.		
Yrs in Institutional Sales		
Years with Firm		

5. Are you a Primary Dealer in U.S. Government Securities? YES NO

6. If so, how long has your firm been a primary dealer? _____

7. What was your firm's total volume in U.S. Government and agency securities trading last year?

Firm-Wide \$ _____ No. of Transactions? _____

Local Office \$ _____ No. of Transactions? _____

City of Richmond
Administrative Manual

DEALER QUESTIONNAIRE & CERTIFICATION

8. Is the Firm owned by a Holding Company? If so, what is its name and net capitalization?

\$ _____ Name _____

9. Please provide your Wiring and Delivery Instructions

10. Which instruments are offered regularly by your local desk?

T-Bills BA's (domestic)

Treasury notes/bonds BA's foreign

Agencies (specify) Commercial paper

_____ Bank CD's

_____ S & L CD's

Instrumentalities (specify) Other (specify)

City of Richmond
Administrative Manual

DEALER QUESTIONNAIRE & CERTIFICATION

11. Which of the above does the Firm specialize in marketing?

12. Identify all personnel who will be trading with or quoting securities to our City's employees.

Name	Title	Phone No.

(ATTACH RESUMES OF ALL THE ABOVE PERSONS)

13. Which of the above personnel have reviewed our City's Investment Program Policy?

14. Indicate which agents of the Firm's local offices are currently licensed, certified or registered, and by whom.

Agent	Licensed or Registered By

City of Richmond
Administrative Manual

DEALER QUESTIONNAIRE & CERTIFICATION

15. Please identify your public-sector clients in our geographical area who are most comparable to our City.

Agency	Contact	Phone No.	Client Since

16. Have any of your public-sector clients ever sustained a loss on a securities transaction arising from a misunderstanding or misrepresentation of the risk characteristics of the instrument?

NO YES *Attach Explanation*

17. Has your firm ever been subject to a regulatory or state or federal agency investigation for alleged improper, fraudulent, disreputable or unfair activities related to the sale of government securities or money market instruments? Have any of the Firm's employees ever been so investigated?

NO YES *Attach Explanation*

18. Has a public-sector client ever claimed in writing that your firm was responsible for investment losses?

NO YES *Attach Explanation*

19. Please provide certified financial statements and other indicators regarding the Firm's capitalization on an annual basis.

City of Richmond
Administrative Manual

DEALER QUESTIONNAIRE & CERTIFICATION

20. What portfolio information do you require from your clients?

21. What reports, transactions, confirmations and paper trail will we receive?

22. Enclose a complete schedule of fees and charges for various transactions.

23. How many and what percentage of your transactions failed last month? Last Year?

Last Month
Last Year

City of Richmond
Administrative Manual

DEALER QUESTIONNAIRE & CERTIFICATION

-CERTIFICATION-

I hereby certify that I have personally read the Investment Program Policy of the City of Richmond and have implemented reasonable procedures and a system of controls designed to preclude imprudent investment activities arising out of transactions conducted between our Firm and the City of Richmond. All sales personnel will be routinely informed of your investment objectives and policies whenever we are so advised. We will notify you immediately by telephone and in writing in the event of a material adverse change in our financial condition. We pledge to:

Exercise due diligence in monitoring the activities of the officers and employees engaged in transactions with the City.

Ensure that all of the officers and employees offering investments to the City are trained in the precautions appropriate to public sector investments.

Submit audited financial statements prepared by an independent certified public accountant to the City on an annual basis within 180 days after the end of the institution's fiscal year.

I attest to the accuracy of our responses to your questionnaire.

Signed: _____ Date: _____

Countersigned: _____ Date: _____
(Person in charge of government securities operations)

Note: Completion of Questionnaire is only part of the City of Richmond's Certification process and does not guarantee that the applicant will be approved to do business with the City of Richmond.