



Welcome to FLCLASS

Thank you for choosing FLCLASS!

This packet contains all the materials necessary to set up your FLCLASS account(s). If you have any questions about the registration process or about your FLCLASS account(s), please do not hesitate to contact us. The FLCLASS Client Service Team can be reached any business day from 8:00 a.m. to 5:00 p.m. ET by phone at (844) 220-7600 or by email at clientservices@flclass.com.

FLCLASS is not a bank. An investment in FLCLASS is not insured or guaranteed by the Federal Deposit Insurance Corporation or any other government agency. Although the FLCLASS prime style fund seeks to preserve the value of your investment at \$1.00 per share, it cannot guarantee it will do so. Please read the applicable FLCLASS Information Statements carefully before making an investment decision. Many factors affect performance including changes in market conditions and interest rates and in response to other economic, political, or financial developments. Investment involves risk including the possible loss of principal. No assurance can be given that the performance objectives of a given strategy will be achieved. Past performance is no guarantee of future results. Any financial and/or investment decision may incur losses.



Registration Procedures

To participate in FLCLASS, please complete the following:

1. Review the Interlocal Agreement (accessible on www.flclass.com).
2. Complete and sign the Instrument of Adoption (page 3).

Under Florida Statutes, Section 218.415, Florida governments have the power to invest in any intergovernmental investment pool authorized pursuant to the Florida Interlocal Cooperation Act, as provided in Section 163.01 of the Florida Statutes. The Instrument of Adoption must be signed by the finance director, treasurer, chief financial officer, or other local official who is properly authorized to invest public funds of your entity.

3. Complete the Entity Registration (page 4).
4. Complete the Authorized Contacts Form (pages 5/6).
5. Complete the FLCLASS Accounts to be Established form; you may open as many accounts as you wish (page 7).
6. Should you be interested in participating in FLCLASS Enhanced Cash, complete the FLCLASS Enhanced Cash Participant Acknowledgement Form (page 8), and complete the FLCLASS Enhanced Cash Accounts to be Established Form; you may open as many accounts as you wish (page 9).
7. Keep the original forms for your records and send the completed packet to the FLCLASS Client Service Team by fax (844) 220-7900 or by email clientservices@flclass.com.

Questions? Please contact us; we would love to hear from you.

FLCLASS Client Service Team
T (844) 220-7600
clientservices@flclass.com



Instrument of Adoption

of that certain
Interlocal Agreement for the
Florida Cooperative Liquid Assets Securities System (FLCLASS)

This Instrument of Adoption (this Instrument) is executed as of the ____ day of _____, 20____,
by and on behalf of _____.

Reference is made to that certain Amended and Restated Interlocal Agreement for the Florida Cooperative Liquid Assets Securities System, dated as of March 4, 2021, made by and among certain Initial Participants (as defined therein) and such additional Participants who may have heretofore and may hereafter join therein, and as may have been and may be modified or amended as provided therein (the Interlocal Agreement). Capitalized terms not defined in this Instrument shall have the meanings given in the Interlocal Agreement.

By executing this Instrument, the undersigned represents and warrants that (a) the undersigned is a Unit of Local Government as defined in the Interlocal Agreement; (b) the person executing this Instrument on behalf of the undersigned is an officer of the Unit of Local Government authorized to execute this Instrument; (c) the undersigned has taken all required action to qualify as a Participant under the Interlocal Agreement, and (d) the undersigned is authorized to invest in FLCLASS pursuant to Section 163.01(17)(a), Florida Statutes with or without an adopted a written investment policy.

By executing this Instrument, the undersigned agrees that it will be bound by all terms and conditions of the Interlocal Agreement, as amended from time to time.

IN WITNESS WHEREOF, the undersigned has executed this Instrument as of the day first above written.

Name of Public Agency _____

Date _____

Authorized Signatory _____

Print Name _____



Trust Registration

Entity Information

Local Government Name (Participant) _____

Entity Type: City/Town County School District Special District
Other (Specify) _____

Mailing Address _____

City _____ Zip _____ County _____

Physical Address (if different than above) _____

City _____ Zip _____ County _____

Tax ID _____ Fiscal Year End Date (Month/Day) _____

I authorize FLCLASS and its transfer agent and administrator to act on any instructions believed to be genuine for any service authorized on this form. I agree that FLCLASS, its transfer agent, and administrator, Public Trust Advisors LLC, and their respective officers, directors, affiliates, representatives, employees and agents (each an "Indemnified Party") will not be liable for any losses, claims, expenses and liabilities (collectively, the "Losses") that result from accepting such instructions, and I agree to indemnify and hold harmless each Indemnified Party from and against any and all Losses arising from or resulting from such reliance on, or acceptance of, such instructions. Withdrawal proceeds can be sent only to the bank(s) indicated below unless changed by written instructions. Each local government is responsible for notifying the Trust of any changes to its account(s).

Wires will be distributed every hour with the final distribution ending at 3:00 p.m. ET; distribution times are subject to change as needed by the FLCLASS Administrator. Additionally, FLCLASS must be notified of any contributions by 3:00 p.m. ET to receive same day credit. **If funds are not received by 5:00 p.m. ET, contribution orders will be voided.**

Banking Information

Bank Name _____ Bank Routing Number (ABA) _____

Account Title _____ Account Number _____

Bank Contact* _____ Contact's Phone Number _____

Wire ACH Both

Additional Banking Information (Optional)

Bank Name _____ Bank Routing Number (ABA) _____

Account Title _____ Account Number _____

Bank Contact* _____ Contact's Phone Number _____

Wire ACH Both

*If there will only be one Authorized Signer on the FLCLASS account, bank contact must be provided to verify bank account information



Authorized Contacts

Authorized Signers Can:	Read-Only Users Can:
Approve changes to the Investor Profile Update banking/contact information Process transactions Receive account updates	Receive account updates Request "view-only" access to monthly statements and transaction confirmations

Authorized Signer

Print First and Last Name

Title

Signature Required

Phone (Required)

Email (Required)

Fax

Additional Contact (Optional) Note – FLCLASS strongly advises each participant to have multiple authorized signers to help prevent fraud

Print First and Last Name

Title

***(Signature Required if Authorized Signer)**

Phone (Required)

Email (Required)

Fax

Permissions (check only one)

Authorized Signer to Move Funds*

Read-Only Access

Additional Contact (Optional)

Print First and Last Name

Title

***(Signature Required if Authorized Signer)**

Phone (Required)

Email (Required)

Fax

Permissions (check only one)

Authorized Signer to Move Funds*

Read-Only Access



Authorized Contacts (cont.)

Additional Contact (Optional)

Print First and Last Name

Title

***(Signature Required if Authorized Signer)**

Phone (Required)

Email (Required)

Fax

Permissions (check only one)

Authorized Signer to Move Funds*

Read-Only Access

Additional Contact (Optional)

Print First and Last Name

Title

***(Signature Required if Authorized Signer)**

Phone (Required)

Email (Required)

Fax

Permissions (check only one)

Authorized Signer to Move Funds*

Read-Only Access

Additional Contact (Optional)

Print First and Last Name

Title

***(Signature Required if Authorized Signer)**

Phone (Required)

Email (Required)

Fax

Permissions (check only one)

Authorized Signer to Move Funds*

Read-Only Access



FLCLASS Accounts to be Established

Name of Public Local Government: _____

Desired Subaccount Name(s)* i.e. General Fund, etc.:

(To be completed by Participant, **at least one Subaccount is required**)

*Name must be limited to 35 characters.

Once your FLCLASS account has been established, you will receive a confirmation email with your login credentials from no-reply@flclass.com. If you do not receive your login credentials within 48 business hours of submission, please first check your junk or spam folder before calling the FLCLASS Client Service team.



FLCLASS Enhanced Cash Participant Acknowledgement Form

Participant Information

Entity Name (Participant) _____

Participant Acknowledgement

The undersigned Authorized Signer for the Participant hereby acknowledges the following:

- The Participant has received and reviewed the FLCLASS Enhanced Cash Information Statement.
- All Enhanced Cash investments are made in accordance with the FLCLASS Enhanced Cash Investment Policy.
- FLCLASS Enhanced Cash is designed to complement the daily liquidity of the FLCLASS fund by gaining exposure to a diversified portfolio of high-quality securities.
- The general objective of FLCLASS Enhanced Cash is to generate a higher level of income than provided by a traditional stable NAV LGIP while seeking to protect Participant capital.
- Withdrawals are available one business day after the request is made. With FLCLASS Enhanced Cash, investments continue to accrue interest during the one-day redemption period. Due to the design of FLCLASS Enhanced Cash, early withdrawals are not permissible.
- Withdrawals can only be initiated in the Participant Portal.
- Any Authorized Signer has full power and authority to make investments for the above Participant.
- FLCLASS Enhanced Cash is designed for investors with a slightly longer investment horizon and the ability to tolerate a higher risk profile.

Authorized Signer

Signature

Date

Printed Name

Title

The investment advisor providing these services is Public Trust Advisors, LLC (Public Trust), an investment adviser registered with the SEC under the Investment Advisers Act of 1940, as amended. Registration with the SEC does not imply a certain level of skill or training. Additionally, this registration provides no guarantee of return or protection against loss. FLCLASS is not a bank. An investment in FLCLASS is not insured or guaranteed by the Federal Deposit Insurance Corporation or any other government agency. Please read the applicable FLCLASS Information Statements carefully before making an investment decision. Many factors affect performance including changes in market conditions and interest rates and in response to other economic, political, or financial developments. Investment involves risk including the possible loss of principal. No assurance can be given that the performance objectives of a given strategy will be achieved. **Past performance is no guarantee of future results. Any financial and/or investment decision may incur losses.**



FLCLASS Enhanced Cash Accounts to be Established

Entity Name: _____

FLCLASS Enhanced Cash Accounts

Desired Subaccount Name(s)* i.e. General Fund, etc.:
(To be completed by Participant)

FLCLASS Enhanced Cash is designed to complement the daily liquidity offered by the FLCLASS portfolio. EDGE is best suited for funds not needed on a frequent or near-term basis. FLCLASS Enhanced Cash is designed for investors with a slightly longer investment horizon and the ability to tolerate a higher risk profile.

FLCLASS Enhanced Cash does not seek to maintain a stable net asset value (NAV) and does not offer daily liquidity. Investing in FLCLASS Enhanced Cash introduces the potential for the reporting of unrealized and realized gains and losses.

The FLCLASS Enhanced Cash investment objectives in order of priority are safety, liquidity, and return. The FLCLASS Enhanced Cash portfolio is structured to provide Florida local governments with an investment vehicle to invest monies not needed for daily liquidity.

If you have questions about which of your local government’s funds are appropriate for the FLCLASS Enhanced Cash portfolio, please contact your FLCLASS representative or email info@flclass.com.

*Name must be limited to 35 characters.

Once your FLCLASS account has been established, you will receive no-reply@flclass.com. If you do not receive your login credentials within 48 business hours of submission, please first check your junk or spam folder before calling the FLCLASS Client Service team.



Dual Authorization Form

Entity Name: _____

Please utilize this form to request dual authorization capabilities on your FLCLASS account. Dual authorization ensures that any transaction entered via the FLCLASS online transaction portal requires approval from a second Authorized Signer in order to be processed (internal transfers between subaccounts do not require dual authorization). **Note:** All Authorized Signers listed on the account can enter transactions and approve them (not just the users below).

Request to Add Dual Authorization

Dual authorization is hereby approved for _____ by the Authorized Signer below. By approving dual authorization, the Authorized Signer acknowledges transactions not approved by the 3:00 p.m. ET cutoff will not be processed. Please ensure transactions are entered in a timely manner and that other authorized signers are available to approve the transactions for processing.

Authorized Signer's Signature

Date

Print Name

Title