

R11-016

RESOLUTION AMENDING AUTHORIZED REPRESENTATIVES

WHEREAS, TOUTOWN OF Addison - 11993

(Participant Name & Location Number)

("Participant") is a local government of the State of Texas and is empowered to delegate to a public funds investment pool the authority to invest funds and to act as custodian of investments purchased with local investment funds; and

WHEREAS, it is in the best interest of the Participant to invest local funds in investments that provide for the preservation and safety of principal, liquidity, and yield consistent with the Public Funds Investment Act; and

WHEREAS, the Texas Local Government Investment Pool ("TexPool/ Texpool *Prime*"), a public funds investment pool, were created on behalf of entities whose investment objective in order of priority are preservation and safety of principal, liquidity, and yield consistent with the Public Funds Investment Act.

NOW THEREFORE, be it resolved as follows:

- A. That the individuals, whose signatures appear in this Resolution, are Authorized Representatives of the Participant and are each hereby authorized to transmit funds for investment in TexPool / TexPool Prime and are each further authorized to withdraw funds from time to time, to issue letters of instruction, and to take all other actions deemed necessary or appropriate for the investment of local funds.
- B. That an Authorized Representative of the Participant may be deleted by a written instrument signed by all remaining Authorized Representatives provided that the deleted Authorized Representative (1) is assigned job duties that no longer require access to the Participant's TexPool / TexPool Prime account or (2) is no longer employed by the Participant; and
- C. That the Participant may by Amending Resolution signed by the Participant add an Authorized Representative provided the additional Authorized Representative is an officer, employee, or agent of the Participant;

List the Authorized Representatives of the Participant. Any new individuals will be issued personal identification numbers to transact business with TexPool Participant Services.

1. Name: Marisa parky	Title: Anancial Services Manager
Phone/Fax/Email: 912-450 4004/91	2.450.1096/mocress Dadisonty. Ool
Signature: W DWD WWW	T The state of the
2. Name: JARY LENGHANGE	Title: Management Avallyst
Phone/Fax/Email: 912-460.1011/91	2.450.1096/ilculandonskia addisanix. Oov
Signature: Jerry Lewandow	ski 15
ORIGINALS REQUIRED	TEX – REP

3. Name: Mart Mu	ambs Title: Mastan 101/12 UNIN Andor
Phone/Fax/Email: 9131	160.1090/912.460.1043/mmount ba 20 daisant co
Signature:	At Carl Colo
4. Name:	Title:
Phone/Fax/Email:	
Signature:	
List the name of the Author transactions and receiving c	zed Representative listed above that will have primary responsibility for performing onfirmations and monthly statements under the Participation Agreement.
Name Marisar	CRRV)
perform only inquiry of sele	of the Participant, one additional Authorized Representative can be designated to cted information. This limited representative cannot perform transactions. If the ate a representative with inquiry rights only, complete the following information.
5. Name:	Title:
Phone/Fax/Email:	
revoked by the Participant, a revocation. This Resolution on the 21 day Spt)	
NAME OF PARTICIPA	NT: The Town of radison, 11333
	BY: Many Signature Total Officer
	Mariga Perry Todd Meier Printed Name
ATTE	FINANUAL SERVICES MANAGER MAYOR Title Signature
	ONPIG TERRY) Printed Name
	AGGSTANTUTYMANAGER CITY SOUPOTORY

This document supersedes all prior Authorized Representative designations.