



RESOLUTION AMENDING AUTHORIZED REPRESENTATIVES

R12-009

WHEREAS, THE TOWN OF ADDISON (11333) (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: ERIC CANNON Title: CFO
Phone/Fax/Email: 912-450-1050/912-450-1065/ecannon@addisontx.gov
Signature: [Handwritten Signature]

2. Name: MARCEA PERREA Title: Financial Services Manager
Phone/Fax/Email: 912-450-1064/912-450-1096/mperrea@addisontx.gov
Signature: [Handwritten Signature]

ORIGINALS REQUIRED

TEX - REP

3. Name: Jerry Lewandowski Title: Purchasing/Billing Supervisor
Phone/Fax/Email: 912.460.1011/912.460.1091/jlewandowski@addisonTX.gov
Signature: [Handwritten Signature]

4. Name: _____ Title: _____
Phone/Fax/Email: _____
Signature: _____

List the name of the Authorized Representative listed above that will have primary responsibility for performing transactions and receiving confirmations and monthly statements under the Participation Agreement.

Name MARISA PERRY

In addition and at the option of the Participant, one additional Authorized Representative can be designated to perform only inquiry of selected information. This limited representative cannot perform transactions. If the Participant desires to designate a representative with inquiry rights only, complete the following information.

5. Name: _____ Title: _____
Phone/Fax/Email: _____

D. That this Resolution and its authorization shall continue in full force and effect until amended or revoked by the Participant, and until TexPool Participant Services receives a copy of any such amendment or revocation. This Resolution is hereby introduced and adopted by the Participant at its regular/special meeting held on the 20th day JUNE, 2012.

NAME OF PARTICIPANT: The Town of Addison, 71333

BY: [Handwritten Signature] X - Todd Meier
Signature

MARISA PERRY Todd Meier
Printed Name

Financial Services Manager Mayor
Title

ATTEST: [Handwritten Signature]
Signature

CHRIS TERRY
Printed Name

Assistant City Manager / City Secretary
Title

This document supersedes all prior Authorized Representative designations.



ADDITION/DELETION FORM FOR AUTHORIZED REPRESENTATIVES

PARTICIPANT NAME: TOWN OF ADDISON LOCATION NUMBER: 05114

PART I: DELETIONS - Please enter the Authorized Representatives to be deleted

- 1. mark mcuamb 3. _____
- 2. _____

PART II: ADDITIONS - Please enter the Authorized Representatives to be added

- 1. Name: ERIC CANNON Title: CFO
 Signature: [Signature] Phone: 972-450-7050
 Email: ecannon@addison.tx.gov
- 2. Name: _____ Title: _____
 Signature: _____ Phone: _____
 Email: _____

PART III: APPROVALS - Please enter the names of all currently Authorized Representatives to authorize the deletions and additions of the individuals above.

- 1. Name: MARISA PERRY
 Signature: [Signature]
 Title: Financial Services Manager
- 2. Name: JEFF LEWANDANSKI
 Signature: _____
 Title: Purchasing & Billing Supervisor
- 3. Name: _____
 Signature: _____
 Title: _____
- 4. Name: _____
 Signature: _____
 Title: _____

Official Seal of Participant (required)

Attested By: [Signature]
Title: CITY SECRETARY



ADDITION/DELETION FORM FOR AUTHORIZED REPRESENTATIVES

PART IV: PRIMARY CONTACT [required] - If the Primary Contact on file with TexSTAR was deleted in Part I of this form, please provide the name of the Authorized Representative that will be the Primary Contact. The Primary Contact is the individual who will receive the daily transaction confirmations, monthly statements, monthly newsletter, TexSTAR updates and other program mailings.

Name: MARISA PERRY

Email Address: mperry@addisonTX.gov

Phone Number: 972.450.1064

PART V: INQUIRY ONLY [optional] - If an Inquiry Only Representative was deleted in Part I and you wish to replace this representative or add an inquiry only representative to your TexSTAR account for the first time, please list this individual below. This limited representative cannot make deposits or withdrawals or sign Bank Information Sheets.

Name: _____ Title: _____

Signature: _____ Phone: _____


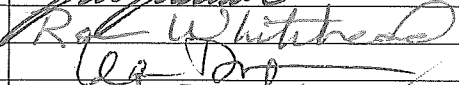

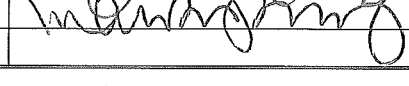

Email: _____

If you have any questions regarding this form or the Authorized Representatives currently on file with TexSTAR for your entity, please contact TexSTAR Participant Services at 1-800-839-7827.

Frost National BankPlease Check One: New Card Addition to Card Currently on File**Safekeeping Signature Card**

X Replacement of Card Currently on File

Town of Addison
Customer Name100362
Capital Markets Account Number5350 Beltline Dallas TX 75254
Address City State ZIP

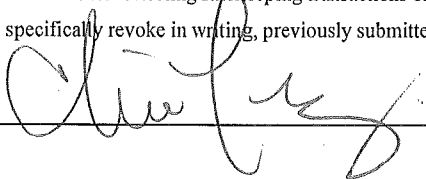
Name (Please Print)	Title	Specimen Signature
The following person(s) may effect safekeeping transactions:		
Eric Cannon	CFO	
Ron Whitehead	City Manager	
Lea Dunn	Deputy City Manager	
Chris Terry	Assistant City Manager	
Marisa Perry	Financial Services Manager	

Important - Please Complete the Certification

To: Frost National Bank ("Bank")

I certify that I am the duly elected, qualified acting secretary of Town of Addison and that the above-named individuals are duly authorized by the Board of Directors of Town of Addison pursuant to applicable resolutions of said Board of Directors and may be recognized by the Bank for effecting safekeeping transactions only. I further certify that the specimen signatures are the genuine signatures of the persons named above. Unless specifically revoke in writing, previously submitted signature cards shall remain in effect.

Signature


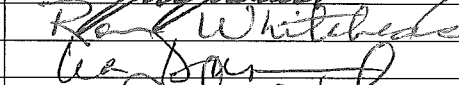
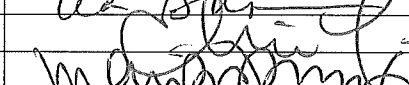
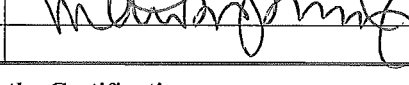
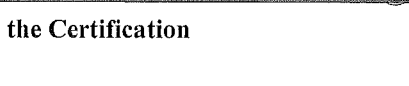


Date

Frost National BankPlease Check One: New Card Addition to Card Currently on File**Collateral Signature Card**

X Replacement of Card Currently on File

Town of Addison
Customer Name100362
Capital Markets Account Number5350 Beltline Dallas TX 75254
Address City State ZIP

Name (Please Print)	Title	Specimen Signature
The following person(s) may authorize SECURITIES Assignments and Releases:		
Eric Cannon	CFO	
Ron Whitehead	City Manager	
Lea Dunn	Deputy City Manager	
Chris Terry	Assistant City Manager	
Marisa Perry	Financial Services Manager	

Important - Please Complete the Certification

To: Frost National Bank ("Bank")

I certify that I am the duly elected, qualified acting secretary of Town of Addison and that the above-named individuals are duly authorized by the Board of Directors of Town of Addison pursuant to applicable resolutions of said Board of Directors and may be recognized by the Bank for authorizing securities assignments and releases. I further certify that the specimen signatures are the genuine signatures of the persons named above. Unless specifically revoke in writing, previously submitted signature cards shall remain in effect.

Signature

