

Resolution Amending Authorized Representatives

Please use this form to amend or designate Authorized Representatives.

This document supersedes all prior Authorized Representative forms.

* Required Fields	
1. Resolution	
WHEREAS,	
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 invade to act as custodian of investments purchased with local investment funds; and	est funds
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	ipal,
WHEREAS, the Texas Local Government Investment Pool ("TexPool/ Texpool Prime"), a public funds investment pool, were created on beha entities whose investment objective in order of priority are preservation and safety of principal, liquidity, and yield consistent with the Public F 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 here authorized to transmit funds for investment in TexPool / TexPool Prime and are each further authorized to withdraw funds from 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 two remaining Authorized Representatives provided that the deleted Authorized Representative (1) is assigned job duties that no longer require access to the P TexPool / TexPool Prime account or (2) is no longer employed by the Participant; and	ʻarticipant's
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;	l
List the Authorized Representative(s) of the Participant. Any new individuals will be issued personal identification numbers to transact business TexPool Participant Services.	ss with
1.	
Name	
Title	
Phone/Fax/Email	
Signature	
2.	
Title	
Phone/Fax/Email	

Signature

1. R	esolution (continued)			
3.				
٥.	Name			_
	Title			
	Phone/Fax/Email			
	Signature			
	I			I
4.	L Name			
	I			I
	L Title			
	 			1
	L Phone/Fax/Email			
				I
	L Signature			
_ist t	he name of the Authorized Representative listed above that wil	ll have p	rimary responsibility for performing transactions and rece	iving confirmations
	monthly statements under the Participation Agreement.			
Name	2			
	dition and at the option of the Participant, one additional Autho			
	mation. This limited representative cannot perform transactions	. If the F	Participant desires to designate a representative with inqu	iry rights only,
OIII	plete the following information.			
_				
Name				
Title				
Phon	e/Fax/Email			
D	. That this Resolution and its authorization shall continue in ful	II force a	and effect until amended or revoked by the Participant, an	d until TexPool
	Participant Services receives a copy of any such amendment			l by the Participant
	at its regular/special meeting held on theday		, 20	
	: Document is to be signed by your Board President, Mayonty Clerk.	or or Co	unty Judge and attested by your Board Secretary, Cit	y Secretary or
			I	
Jame	e of Participant*			
			ATTEST	
SIGN	ieu		ATTEST	
Signa	ture*	•	Signature*	
Printe	ed Name*		Printed Name*	
				1
Title*		1	Title*	
2 M	ailing Instructions			

The completed Resolution Amending Authorized Representatives can be faxed to TexPool Participant Services at 1-866-839-3291, and mailed to:

TexPool Participant Services 1001 Texas Avenue, Suite 1400

Houston, TX 77002

ORIGINAL SIGNATURE AND DOCUMENT REQUIRED

TEX-REP

2 OF 2