

## Resolution No. 2014-133 Authorizing Participation in the TexPool Investment Pools And Designating Authorized Representatives

WHEREAS, City of Shoreacres, Texas - Location 77640

("Participant") is a local government or state agency of the State of Texas and is empowered to delegate to the public funds investment pools 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 Pools ("TexPool/TexPool Prime"), public funds investment pools, were created on behalf of entities whose investment objectives 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 Participant shall enter into a Participation Agreement to establish an account in it's name in **TexPool/TexPool Prime**, for the purpose of transmitting local funds for investment in **TexPool/TexPool Prime**.
- B. 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.

List of the authorized representatives of the Participant. These individuals will be issued P.I.N. numbers to transact business via the phone with a Participant Service Representative.

1. Name: David K	K. Stall	Title:	City Secretary	
Phone/Fax/Email: 2	281.471.2244 / 281.471.8955 / administra	ator@c	ityofshoreacres.us	
Signature:				
2. Name: Rick Mo	oses	Title:	Mayor	
Phone/Fax/Email: 281.471.2244 / 281.471.8955 / mayor@cityofshoreacres.us				
Signature:	Emlon?			
2 Name: Bishard	Adams	Titlet	Mayor pro tem	
3. Name: Richard Adams		Tale.	Mayor pro tern	
Phone/Fax/Email: 281.471.2244 / 281.471.8955 /				
Signature: _	120 0			
4. Name:	•	Title:		
Phone/Fax/Email:				
Signature:				
_				

5. Name: Titl	e:
Phone/Fax/Email:	
Signature:	
List the name of the Authorized Representative provided above that will transactions and receiving confirmations and monthly statements under the	
Name: David K. Stall	
In addition and at the option of the Participant, one additional authorized inquiry only of selected information. This limited representative cannot n Participant desires to designate a representative with inquiry rights only,	nake deposits or withdrawals. If the
6. Name Rick Moses Title	Mayor
Phone/Fax/Email: 281.471.2244 / 281.471.8955 / mayor@cityofshore	
C. That this resolution and its authorization shall continue in full the Participant, and until <b>TexPool/TexPool Prime</b> receives a copy of any	
This resolution is hereby introduced and adopted by the Participant at its Day of May, 20 14	regular/special meeting held on the 19th
NAME OF PARTICIPANT City of Shoreacres, Texas	<u> </u>
BY: Smars	<u></u>
Signature	
Rick Moses	<del></del>
Printed Name	
Mayor	
Title	
ATTEST:	
Signature	OREACA
David K. Stall	E STATE OF THE STA
Printed Name	0
City Secretary	
Title	
	The state of the s
	OFFICIAL SEAL