



**Model Resolution or Ordinance:**

**Participation Agreement**

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**Authorizing Participation in *TexasTERM***

WHEREAS Collin County Community College District (“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 TexasTERM Local Government Investment Pool (“TexasTERM”), a public funds investment pool, was 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 its name in TexasTERM, for the purpose of transmitting local funds for investment in TexasTERM.
- B. The Participant shall designate one or more individuals to act as “Authorized Representatives” of the Participant, in the manner provided in the form attached to this Participation Agreement, to transmit funds for investment in the Pool and to withdraw funds from the Pool from time to time, to issue letters of instruction, and take such other actions deemed necessary or appropriate for the investment of local funds.
- C. That this Resolution and its authorization shall continue in full force and effect until amended or revoked by the Participant, and until TexasTERM 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 23rd day of October, 2018.

**NAME OF PARTICIPANT:** Collin County Community College District

**BY:** \_\_\_\_\_  
 Signature  
Dr. J. Robert Collins  
 Printed Name  
Chairman  
 Title

**ATTEST:** \_\_\_\_\_  
 Signature  
Dr. Raj Menon  
 Printed Name  
Treasurer  
 Title

**Seal:**