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Authorized Representative Add Form

Name of Participe	ant Ector County Independent S	chool District Participant N	lumber 68901
Addition of Autho	rized Representative		
tives within the mo Agreement and an Participant's Lone	eaning of the Inter-local Agree by other documents, as may be Star Investment Pool (Lone Sta on Statement and take all other	ment (Agreement), with full required to deposit money or account from time to time	signated as Authorized Representa- power and authority to execute the to and withdraw money from the in accordance with the Agreement or appropriate for the investment of
	Rep #1	Rep #2	Rep #3
Printed Name	Deborah Ottmers	Albessa Chavez	
Title	Chief Financial Officer	Director of Finance	
E-mail address	deborah.ottmers@ectorcountyisd.org	albessa_chavez@ectorcountyisd_c	org
Signature	Delbrah Offines	albessa Chai	<u></u>
In addition to the f Lone Star Investme the Government Ei senting local funds PASSED AND APP	serving as Authorized Represen oregoing Authorized Represen ent Pool Board of Trustees from ntity and, as such, shall have re of the Government Entity. ROVED this 15th day o	ntative. tative, each Investment Office time to time is hereby designs sponsibility for investing the February By:	promptly notify Lone Star of any cer of Lone Star appointed by the gnated as an investment officer of e share of Lone Star assets repre-
Printed Name, Board President		Printed Name, Board Secretary	
Before me,	, on this day	personally appeared	known to
	ame of notary)		of President and Secretary)
me (or proved to m	e on the oath of) or through ng oath) (identi	to be the person(s)
whose name is sub	' '	•	me that he executed the same for
	onsideration therein expressed	_	
	nd and seal of office this		, 20• •
(Persor	nalized Seal)		
	Notary Public's Signature		