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SOUTH SAN ANTONIO INDEPENDENT SCHOOL DISTRICT

Agenda Item Summary

| Meeting Date: May 17, 2017 | | | |
|---|--------------|--|--|
| Purpose: Report Only Recognition Discussion/ Possible Action | | | |
| Presenter(s): Dr. Abelardo Saavedra, Superintendent | | | |
| | | | |
| Item Title: | | | |
| Discussion and possible action to approve Juan C Zamora, Chief Financial Officer as the TexPool Government Investment Authorized District Representative. (Resolution Attached) | | | |
| Description: | | | |
| Resolution Amending Authorized District Representatives, for the TexPool Local Government Investment Pool | | | |
| * | | | |
| | | | |
| District Goal: | | | |
| | | | |
| Goal 5 We will prioritize district revenues to guide student future choices. | | | |
| Funding Budget Code and Amount: | CFO Approval | | |
| | | | |

APPROVAL ROUTE

Principal/Director:

Executive Director:

Chief Administrator:

Superintendent:

SIGNATURE

DATE

4/1

5-3-20



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, South San Antonio Independent School District Participant Name* | |

("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 two 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 Representative(s) of the Participant. Any new individuals will be issued personal identification numbers to transact business with TexPool Participant Services.

| 1. | Juan C Zamora | | | |
|-----------------|---|--|--|--|
|) | Name | | | |
| | Chief Financial Officer | | | |
| | Title | | | |
| | (210)977-7025, (210)977-7019, jzamora@southsanisd.net | | | |
| i | Phone/Fax/Email | | | |
| 1 | | | | |
| , | Signature / O 7 | | | |
| 2. | 7 0,5 | | | |
| | Name / | | | |
| | | | | |
| | Title | | | |
| | | | | |
| Phone/Fax/Email | | | | |
| | | | | |
| | Signature | | | |

| Baseline | resolution (continued) | |
|-----------------|--|---------------------------------------|
| 3. | | 1 |
| ٥. | Name | - |
| | | _ |
| | Title | = |
| | | _ |
| | Phone/Fax/Email | |
| | | |
| | Signature | |
| | I | 1 |
| 4. | Name | - |
| | 1 | 1 |
| | Title | - |
| | | _ |
| | Phone/Fax/Email | |
| | | _ |
| | Signature | |
| | the name of the Authorized Representative listed above that will have primary responsibility for performing transactions and receive monthly statements under the Participation Agreement. | ing confirmations |
| | 3004-004-00-00-00-00-00-00-00-00-00-00-00 | |
| Name | uan C Zamora | |
| | ddition and at the option of the Participant, one additional Authorized Representative can be designated to perform only inquiry of | selected |
| infor | rmation. This limited representative cannot perform transactions. If the Participant desires to designate a representative with inquir | |
| com | plete the following information. | |
| | | |
| Name | e · | |
| | | |
| Title | | |
| | | 250 |
| Phon | ne/Fax/Email | |
| 0 | D. That this Resolution and its authorization shall continue in full force and effect until amended or revoked by the Participant, and Participant Services receives a copy of any such amendment or revocation. This Resolution is hereby introduced and adopted at its regular/special meeting held on the 17th day May , 20 17. | |
| | | 2 |
| | e: Document is to be signed by your Board President, Mayor or County Judge and attested by your Board Secretary, City Inty Clerk. | Secretary or |
| Sc | outh San Antonio Independent School District | |
| Name | e of Participant* | |
| SIGI | NED ATTEST | |
| ı | | I |
| Signa | ature* Signature* | |
| An | gelina Osteguin Linda Longoria | 1 |
| | ed Name* Printed Name* | |
| Во | ard President Board Secretary | |
| Title* | Title* | |
| 2 N | Mailing Instructions | · · · · · · · · · · · · · · · · · · · |
| Office Control | completed Resolution Amending Authorized Representatives can be faxed to TexPool Participant Services at 1-866-839-3291, or | mailed to: |
| | Pool Participant Services | |
| 1001 | 1 Texas Avenue, Suite 1400 | |
| | ston, TX 77002 | No. 2010-2010-2010 |
| ORI | GINAL SIGNATURE AND DOCUMENT REQUIRED TEX-REP | 2 OF 2 |
| T. D | 1. I Destriction Commission | |

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