

EXHIBIT "A"

RESOLUTION AMENDING AUTHORIZED REPRESENTATIVES

WHEREAS.	City of Ro	ound Rock 8	78399
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(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 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 Representatives of the Participant. Any new individuals will be issued personal identification numbers to transact business with TexPool Participant Services.

1. Name: Su	usan Morgan	Title:	Chief Financial Officer	
Phone/Fax/En	mail: 512-218-5445/512-218-5442/smorgan@roundrocktexa	s.gov		
Signa	ture: Suam Magain			-
2. Name: Je	erry Galloway	Title:	Controller	
Phone/Fax/En	mail: 512-218-5432/512-218-5442/jdg@roundrocktexas.gov			
Signa				
ORIGINAL SI	IGNATURE AND DOCUMENT REQUIRED		TEX	- REP

3. Name: Joan Sharp		Title:	Treasury Accountant
Phone/Fax/Email: 512-218-3297	/512-218-5442/jsharp@roundrocktexas.g	gov	
Signature:	an Shaye		
0		TC:41	
4. Name: Sherri Crone	/F10 010 F1101		Accounting Supervisor
	/512-218-5442/scrone@roundrocktexas.	gov	
Signature: Shu	re Clore		
	Representative listed above that wil nations and monthly statements un		orimary responsibility for performing Participation Agreement.
Name Joan Sharp			
perform only inquiry of selected Participant desires to designate a	e Participant, one additional Authorinformation. This limited represent representative with inquiry rights of	ative ca only, con	nnot perform transactions. If the mplete the following information.
5. Name: Jo Rikki Ramirez		Title:	Investment Advisor
Phone/Fax/Email: <u>512-320-5042</u>	512-320-5041/rikki@patterson.net		
revoked by the Participant, and until TexPool Participant Services 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, 20 Document is to be signed by your Board President, Mayor or County Judge and attested by your Board Secretary, City Secretary or County Clerk. NAME OF PARTICIPANT: City of Round Rock			
SIGNED:			
SIGNED:	Signature		The state of the s
	Alan McGraw		
	Printed Name		
	Mayor Title		**************************************
	Title		
ATTEST:	G:		
	Signature		
	Sara White		
	Printed Name		
	City Clerk		
	Title		

This document supersedes all prior Authorized Representative designations.

3. Name: Elaine V	Vilson	Tit	tle:	Accounting Manager
Phone/Fax/Email:		512-218-5442/ewilson@roundrocktexas.gov		
Signature:	Elan	Sillen		
4. Name: Lorie La				Asst. Finance Director
		512-218-5442/llankford@joundrocktexas.gov	/	
Signature:	Ague	Xanksonex		
List the name of the	Authorized E	Representative listed above that will have	vo r	rimary responsibility for performing
		nations and monthly statements under t		
		,		
Name Joan Sha	arp			
In addition and at th	ne option of th	e Participant, one additional Authorize	d R	epresentative can be designated to
		nformation. This limited representative		
		representative with inquiry rights only,		
5. Name: Jo Rikki	Pomiroz.	Tie	tla.	Investment Advisor
		512-320-5041/rikki@patterson.net	ue.	Investment Advisor
r none/rax/Eman.	512-320-3042/	512-320-304 Mikki@patterson.net		
D. That this	Resolution a	nd its authorization shall continue in fu	ıll fo	orce and effect until amended or
		ntil TexPool Participant Services receiv		
		eby introduced and adopted by the Par	ticij	pant at its regular/special meeting held
on theday _		, 20		
		by your Board President, Mayor or (
attest	ed by your Bo	oard Secretary, City Secretary or Co	unt	y Clerk.
NAME OF PAR	TICIPANT:	City of Round Rock		
	CICNED			
	SIGNED:	Signature		
		Alan McGraw		
		Printed Name		
		Mayor		
		Title		
	ATTEST:			
	AIIESI.	Signature		
		Sara White	- 0	
		Printed Name		
		City Clerk		
		Title		

This document supersedes all prior Authorized Representative designations.

3. Name: Olivia Riley		Title:	Accounting Manager
	/512-218-5442/oriley@roundrocktexas.g	jov	
Signature:	nia Kley		
	Û	m: 1	
4. Name: Lynn Olsen			Accountant
	/512-218-5442/lolsen@roundrocktexas.g	gov	
Signature:	UL CUSER		
List the name of the Authorized	Representative listed above that wi	11 have r	orimary responsibility for performing
	mations and monthly statements ur		
Name Joan Sharn	•		
Name Joan Sharp		4	
	ne Participant, one additional Author		
	information. This limited represent		
Participant desires to designate a	representative with inquiry rights	only, coi	mplete the following information.
5. Name: Jo Rikki Ramirez		Title:	Investment Advisor
Phone/Fax/Email: 512-320-5042	/512-320-5041/rikki@patterson.net		
	11. 11. 11. 11. 11.		1.00
	and its authorization shall continue ntil TexPool Participant Services r		
			pant at its regular/special meeting held
on the day		o i di tioi	paint at its regarding poolar mooting nord
Document is to be signed	by your Board President, Mayor	r or Cou	inty Judge and
	oard Secretary, City Secretary of		
NAME OF PARTICIPANT:	City of Round Rock		
SIGNED:			
	Signature		
	Alan McGraw		
	Printed Name		
	Mayor		
	Title		
A TOTAL COL			
ATTEST:	Signature		
	Sara White		
	Printed Name		
	City Clerk		
	Title		

This document supersedes all prior Authorized Representative designations.