MEMORANDUM

DATE: September 14, 2022

TO: Mayor Lankford & City Council VIA: Mercy Rushing, City Manager

FROM: Cindy Karch, City Secretary

SUBJECT: Consider approval of a Resolution changing Authorized Representatives

with Texas Local government Investment Pool (TexPool/TexPool Prime).

CK

Council Meeting Agenda Item for September 19, 2022

Background Information:

Current approved users for TexPool are Mercy Rushing, Cindy Karch, David Madsen, Lynn Kitchens and Kevin White. We are asking to remove Lynn Kitchens and Kevin White and add Jayne Lankford. Each user has the ability to login to the account and view statements, and initiate deposit or withdrawal transactions.

TexPool does not have dual control capability to initiate transfers. However, a single user cannot update banking information. Wiring Instructions can only be changed by completing a Banking Information Change Sheet which has to be signed by two users before TexPool will update the account.

Recommendation:

It is recommended that council approve the resolution.

Final Disposition:



Resolution Amending Authorized Representatives

Please complete this form to amend or designate Authorized Representatives. This document supersedes all prior Authorized Representative forms.

* Required Fields

Signature

1. Resolution

WHEREAS,

City	of Mineola				7 9 7 1 7
Partici	pant Name*				Location Number*
(" Par to inv	ticipant ") is a local government of the est funds and to act as custodian of in	State of Texas and is emvestments purchased wit	powered to de h local investn	elegate to a p nent funds; an	public funds investment pool the authority and
WHE princi	REAS , it is in the best interest of the P pal, liquidity, and yield consistent with	articipant to invest local f the Public Funds Investn	funds in investinent Act; and	ments that pro	ovide for the preservation and safety of
behal	REAS, the Texas Local Government In f of entities whose investment objective he Public Funds Investment Act.	vestment Pool (" TexPool ve in order of priority are	/ Texpool Pri preservation a	me "), a public and safety of p	c funds investment pool, were created on principal, liquidity, and yield consistent
NOW	THEREFORE, be it resolved as follow	vs:			
A.	hereby authorized to transmit funds for	or investment in TexPool	/ TexPool Prim	ne and are ead	tatives of the Participant and are each ch further authorized to withdraw funds essary or appropriate for the investment
В.	That an Authorized Representative of Representatives provided that the de Participant's TexPool / TexPool Prime	leted Authorized Represe	entative (1) is a	ssigned job c	ent signed by two remaining Authorized duties that no longer require access to the ant; and
C.	That the Participant may by Amendin additional Authorized Representative				rized Representative provided the
List th busin	ne Authorized Representative(s) of the ess with TexPool Participant Services.	Participant. Any new indi	viduals will be	issued perso	nal identification numbers to transact
1.	Mercy Rushing		City Mana	ager	
	Name		Title		
	9 0 3 5 6 9 6 1 8 3	9 0 3 5 6 9 6	6 5 5 1	mrushing@	@mineola.com
	Phone	Fax		Email	
	Signature				
2.	Cindy Karch	1	City Secre	etarv	
۷.	Name		Title	<i>j</i>	
	9 0 3 5 6 9 6 1 8 3	9 0 3 5 6 9 6	6 5 5 1		nineola.com
	Phone	Fax		Email	
	Signature				
3.	Jayne Lankford Name		Mayor Title		
	9 0 3 5 6 9 6 1 8 3	9 0 3 5 6 9 6	6 5 5 1		nineola.com
	Phone	Fax		Email	

Form Continues on Next Page 1 of 2

1. Resolution (continued)						
4 David Madsen	Fire Marshall					
Name	Title					
9 0 3 5 6 9 6 1 8 3 9 0 3 5 6 9 6 Phone	dmadsen@mineola.com Email					
Signature						
List the name of the Authorized Representative listed above that will confirmations and monthly statements under the Participation Agree	have primary responsibility for performing transactions and receiving ement.					
Cindy Karch						
Name						
In addition and at the option of the Participant, one additional Authorized Representative can be designated to perform only inquiry of selected information. <i>This limited representative cannot perform transactions</i> . If the Participant desires to designate a representative with inquiry rights only, complete the following information.						
Name Title						
Phone Fax	Email					
D. That this Resolution and its authorization shall continue in full force and effect until amended or 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 2 9 day of September 1 2 0 2 2 .						
Note: Document is to be signed by your Board President, Mayor or County Judge and attested by your Board Secretary, City Secretary or County Clerk.						
City of Mineola						
Name of Participant*						
SIGNED	ATTEST					
Signature*	Signature*					
Jayne Lankford	Cindy Karch					
Printed Name*	Printed Name*					
Mayor	City Secretary					
Title*	Title*					
2. Delivery Instructions						

TEX-REP

Please return this document to ${\bf TexPool\ Participant\ Services}:$

Email: texpool@dstsystems.com

Fax: 866-839-3291

and I

2 OF 2



Authorized Representative Deletion/Update Form

Please complete this form to delete Authorized Representative(s) of the Participant. *Required Fields 1. Participant Information 0 9 1 4 2 0 2 2 |7 | 9 | 7 | 1 | 7 | City of Mineola Participant Name* Location Number* Effective Date* 2. Deletions Please print the name(s) of the individual(s) to be deleted: As Authorized Representative(s): As Inquiry Only Representative(s): Lynn Kitchens Kevin White 3. 3. Primary Contact If the person being deleted is the Primary Contact, please complete all fields in this section for the TexPool Authorized Representative that will be the new Primary Contact. The Primary Contact is the individual who will receive the daily transaction confirmations, monthly statements, monthly newsletter, TexPool Updates, and other TexPool mailings. Cindy Karch City Secretary Name 9 | 0 | 3 | 5 | 6 | 9 | 6 | 1 | 8 | 3 9 0 3 5 6 9 6 5 5 1 ckarch@mineola.com Telephone Number **Email Address** 4. Inquiry Only If the person being deleted is an Inquiry Only Representative, please complete all fields in this section if you wish to add another individual in this capacity. Note: Inquiry Only Representatives cannot perform transactions. Name Title Telephone Number Fax Number **Email Address**

Form Continues on Next Page 1 of 2

5. Approvals Please enter the name of two individuals who are currently Authorized Representatives and who authorize the deletion(s) of the individual(s) above. Note: This authorization must be executed by a current Authorized Representative of the Participant as set forth in the duly enacted Resolution of the Participant, which is on file with TexPool.

resolution of the Farticipant, which is on the with Text ooi.	
Authorized Representative Signature*	
Mercy Rushing Printed Name*	9 0 3 5 6 9 6 1 8 3
City Manager	Telephone Number
Title*	
Authorized Representative Signature*	Date*
Cindy Karch	9 0 3 5 6 9 6 1 8 3
Printed Name*	Telephone Number
City Secretary	
Title*	

6. Delivery Instructions

Please return this document to **TexPool Participant Services**:

Email: texpool@dstsystems.com

Fax: 866-839-3291

TEX-REP 2 OF 2