

1. Certification of Authorized Individuals			
I, Donica Sessop (Name) hereby certify that the following are authorized:			
to add or delete users to access and/or transact with PTIF accounts; to add, delete, or make changes			
to bank accounts tied to PTIF accounts; to open or close PTIF accounts; and to execute any			
necessary forms in connection with such changes on behalf of The life of Hildale Utah			
(Name of Legal Entity). Please list at least two individuals. Each individual must have a unique email.			
Name	Title	Email	Signature(s)
JOHN BARLOW	CITY MANAGER	JOHNB@HILDALECITY.COM	Alle
MARIAH LA CORTI	CITY TREASURER	TREASURER@HILDALECIT	mana La Carti
ATHENA CAWLEY	CITY RECORDER	RECORDER@HILDALECITY	Athena Cawley
The authority of the named individuals to act on behalf of			
(Name of Legal Entity) shall remain in full force and effect until written revocation from			
(Name of Legal Entity) is delivered to the Office of the State Treasurer.			
2. Signature of Authorization			
I, the undersigned,(Title) of the above named entity, do hereby certify			
that the forgoing is a true copy of a resolution adopted by the governing body for banking and			
investments of said entity on the 6th day of 4ugvs+, 20 zo, at which a quorum			
was present and voted; that said resolution is now in full force and effect; and that the signatures as			
shown above are genuine).		
Signature	Date	Printed Name Ti	tle
Vonia Jose	of Avaust, 202	Printed Name Ti	Mayor
STATE OF UTAH)		
COUNTY OF Washin	S S		
	5	,	
Subscribed and sworn to me on this 6 day of August, 2020, by Donia 5e5508 (Name), as Mayo (Title) of			
<u>Donia Sebsog</u> (Name), as <u>Μαγος</u> (Title) of			
(Name of Entity), proved to me on the basis of			
satisfactory evidence to be the person(s) who appeared before me.			
		4 1 10 1/1	1101
(seal) Notary F	R RAKEL HOLM Public, State of Utah mission # 710304	Signature Amber Pala	Mem