



**1. Resolution (continued)**

4. Lindsey Wheeler CityAdministrator  
 Name Title  
8 3 0 7 7 9 4 5 4 1 Lboyd@lavernia-tx.gov  
 Phone Fax Email  
Lindsey Wheeler  
 Signature

List the name of the Authorized Representative listed above that will have primary responsibility for performing transactions and receiving confirmations and monthly statements under the Participation Agreement.

Lindsey Wheeler  
 Name

In addition and at the option of the Participant, one additional Authorized Representative can be designated to perform only inquiry of selected information. *This limited representative cannot perform transactions.* If the Participant desires to designate a representative with inquiry rights only, complete the following information.

Jenny Begole BillingClerk  
 Name Title  
8 3 0 7 7 9 4 5 4 1 Jbegole@lavernia-tx.gov  
 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 13 day of June, 2024.

**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 La Vernia  
 Name of Participant\*

**SIGNED**  
Mos  
 Signature\*  
Martin poore  
 Printed Name\*  
Mayor  
 Title\*

**ATTEST**  
Lindsey Wheeler  
 Signature\*  
Lindsey wheeler  
 Printed Name\*  
City Secretary  
 Title\*

**2. Delivery Instructions**

Please return this document to **TexPool Participant Services:**  
**Email:** [texpool@dstsystems.com](mailto:texpool@dstsystems.com)  
**Fax:** 866-839-3291