



Authorized Representative Deletion/Update Form

Please complete this form to delete Authorized Representative(s) of the Participant.

***Required Fields**

1. Participant Information

City of Rollingwood	78272	02182026
Participant Name*	Location Number*	Effective Date*

2. Deletions

Please print the name(s) of the individual(s) to be deleted:

As Authorized Representative(s):

- Makayla Rodriguez
-
-

As Inquiry Only Representative(s):

-
-
-

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.*

Name	Title
Telephone Number	Fax 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

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.

Authorized Representative Signature*

Printed Name*

Title*

Authorized Representative Signature*

Printed Name*

Title*

Date*

Telephone Number

Date*

Telephone Number

6. Delivery Instructions

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

Email: texpool@dstsystems.com

Fax: 866-839-3291