

Public Entity Resolution

1. Certification of A	uthorized Individu				
, Daniel M. Olson	I, Daniel M. Olson (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 change				
		to open or close PTIF acc		cute any	
		changes on behalf of Sa			
(Name of Legal Entity). Please list at leas	st two individuals. Each in	ndividual must hav	e a unique email.	
Name	Title	Email		Signature(s)	
Norman Beagley	City Manager	y Manager nbeagley@santaquin.org			
Shannon Hoffman	Finance Director	Finance Director shoffman@santaquin.org			
Joyce Lamb	Treasurer	jlamb@santa	jlamb@santaquin.org		
The authority o	f the named individ	uals to act on behalf of	antaquin City		
€ 5 70		I force and effect until wr		m	
Santaquin City (Name of Legal Entity) is delivered to the Office of the State Treasurer.					
2. Signature of Auth					
I, the undersign	COUNTY I	(Title) of the ab	THE PARTY OF THE PROPERTY OF THE PARTY OF THE PARTY OF THE PARTY.		
		ution adopted by the gov	- 15 IN	55 C	
		day of _June			
		on is now in full force and	d effect; and that th	ne signatures as	
shown above are gen	uine.				
Signature	Date	Printed Name	Title		
	June 6, 2023	Daniel M. Olson	Mayor		
STATE OF UTAH		j			
01/112 01 01/11		'§			
COUNTY OF)			
0.1	6th	luno	- 22		
	to me on this	day of			
Daniel M. Olson	(Name), as _		(Title) of		
Santaquin City	- l H /- \		proved to me on the	ne basis of	
salistactory evidence to	b be the person(s) \	who appeared before me			
()	Signature				
(seal)					