RESOLUTION VILLAGE OF GILBERTS

A Resolution authorizing an appointment of an authorized Agent to Administer the IMRF Funds on behalf of the Village of Gilberts

Be it Resolved by the President and Board of Trustees of the Village of Gilberts, Kane County, Illinois that:

Section 1:

The Village of Gilberts hereby authorizes the Village President with the consent of the Village Trustees to authorize the appointment of Laura Erickson to service as the IMRF Authorized Agent to Administer the IMRF Funds and to execute such documents as are necessary and convenient to effectuate the appointment as here by attached hereto and made a part hereof as Exhibit A as approved.

Section 2:

This resolution shall be in full force and in effect from and after its passage and approval pursuant to law.

Passed this 2 day of May, 2017 by a roll call vote as follows:

		Nays	<u>Absent</u>	<u>Abstain</u>
Trustee Dan Corbett Trustee Elissa Kojzarek Trustee Nancy Farrell Trustee Jeanne Allen Trustee Lou Hacker Trustee Guy Zambetti President Rick Zirk INCORPORATED 1890 ILLINOIS ATTEST: Village Clerk, I Published:	Measl	THIS 2 Nd D	AY OF May	<u>Aostain</u>
	Jebra Meadov	WS		



NOTICE OF APPOINTMENT OF AUTHORIZED AGENT

IMRE. IMRF Form 2.20 (Rev. 10/2014)

INSTRUCTIONS

- The governing body of an IMRF employer (including townships) can appoint any qualified party as the employer's IMRF Authorized Agent.
- The governing body makes the appointment by adopting a resolution.
- The clerk or secretary of the governing body must certify the appointment (see Certification below).
- Mail the completed form to the Illinois Municipal Retirement Fund.
- · A copy of the completed form should be retained by the employer.
- The new Authorized Agent will need to register for a new User ID on IMRF Employer Access.

EMPLOYER NAME	EMPLOYER IMRF I.D. NUMBER				
VILLAGE OF GILBERTS	06386				
AUTHORIZED AGENT'S SALUTATION LAST NAME FIRST NAME	ME MIDDLE INITIAL JR., SR., II, ETC.				
□ Dr. □ Mr. ☑ Mrs. □ Ms. ERICKSON LAURA	K				
TYPE OF GOVERNING BODY MUNICIPAL					
DATE APPOINTMENT MADE (MM/DD/YYYY) EFFECTIVE DATE OF APPOINTMENT (MM/DD/YYYY) POSITION TITLE					
5/2/2017 5/2/2017 FINANCE DIRECTOR					
Powers and duties delegated to Authorized Agent pursuant to Sec. 7-135 of Illinois Pension Code by governing body (P.A. 97-0328 removed the requirement that the Authorized Agent be a participant in IMRF to file a petition or cast a ballot):					
To file Petition for Nominations of an Executive Trustee of IMRF XYes No					
To cast a Ballot for Election of an Executive Trustee of IMRF					
Y 100					
SIGNATURE OF AUTHORIZED AGENT NAMED ABOVE	DATE (MM/DD/YYYY)				
SIGNATURE OF AUTHORIZED AGENT NAMED ABOVE					
CERTIFICATION					
DEBRA MEADOWSAL O do hereby certify that I am VILLAGE CLERK					
VIET A CENTE CU DE BITO.					
of the NAME OF EMPLOYER					
and the keeper of its pooks and records and the foregoing appointment and delegation were made by resolution duly adopted on the					
date indicated , 590 60					
The state of the s					
SIGNATURE OF CLERK OR SECRETARY					
BUSINESS ADDRESS All correspondence and deminuscrations with the Authorized Agent are to be addressed as follows:					
NAME (IF DIFFERENT FROM ABOVE)					
Mrs. rs. DMs. LAURA ERICKSON					
BUSINESS ADDRESS					
87 GALLIGAN ROAD					
CITY STATE AND ZIP + 4					
GILBERTS, IL 60136-9015					
DAYTIME TELEPHONE NO. (with Area Code)	ALTERNATE TELEPHONE NUMBER (with Area Code)				
(847) 428-2861	(847) 428-4167				
FAX NO. (with Area Code)	EMAIL ADDRESS				
(847) 428-2955	LERICKSON@VILLAGEOFGILBERTS.COM				