

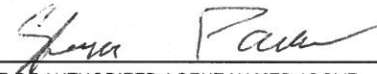


# NOTICE OF APPOINTMENT OF AUTHORIZED AGENT

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 Village of Westmont		EMPLOYER IMRF I.D. NUMBER 00661	
AUTHORIZED AGENT'S SALUTATION <input type="checkbox"/> Dr. <input checked="" type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.	LAST NAME Parker	FIRST NAME Spencer	MIDDLE INITIAL JR., SR., II, ETC. W.
TYPE OF GOVERNING BODY Municipality			
DATE APPOINTMENT MADE (MM/DD/YYYY) 12/06/2018	EFFECTIVE DATE OF APPOINTMENT (MM/DD/YYYY) 12/06/2018	POSITION TITLE 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		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
To cast a Ballot for Election of an Executive Trustee of IMRF		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
 SIGNATURE OF AUTHORIZED AGENT NAMED ABOVE		11/07/2018 DATE (MM/DD/YYYY)	
<b>CERTIFICATION</b>			
I, <u>Virginia Szymski</u> , do hereby certify that I am <u>Clerk</u>		CLERK OR SECRETARY	
of the <u>Village of Westmont</u>		NAME OF EMPLOYER	
and the keeper of its books and records and the foregoing appointment and delegation were made by resolution duly adopted on the date indicated.			
SEAL		SIGNATURE OF CLERK OR SECRETARY	
<b>BUSINESS ADDRESS</b>			
All correspondence and communications with the Authorized Agent are to be addressed as follows:			
NAME (IF DIFFERENT FROM ABOVE) <input checked="" type="checkbox"/> Mr. <input type="checkbox"/> Ms. Spencer Parker			
BUSINESS ADDRESS 31 W. Quincy St.			
CITY STATE AND ZIP + 4 Westmont, IL 60559-1897			
DAYTIME TELEPHONE NO. (with Area Code) (630) 981-6234		ALTERNATE TELEPHONE NUMBER (with Area Code)	
FAX NO. (with Area Code) (630) 829-4441		EMAIL ADDRESS sparker@westmont.il.gov	

### IMRF

2211 York Road Suite 500 Oak Brook, IL 60523-2337

Employer Only Phone: 1-800-728-7971 Member Services Representatives 1-800-ASK-IMRF (1-800-275-4673) Fax (630) 706-4289