STATE OF ILLINOIS  )
COUNTIES OF DUPAGE  ) SS
AND WILL  )

SECRETARY’S CERTIFICATE

I, Chad Chaffin, the duly qualified and acting Secretary of the Board of Trustees of the Lisle-Woodridge Fire Protection District, DuPage and Will Counties, Illinois, and the keeper of the records thereof, do hereby certify that attached hereto is a true and correct copy of a Resolution entitled:

Resolution No. 16-____

A RESOLUTION TO APPOINT NANCY MCCLAIN AS IMRF AUTHORIZED AGENT FOR THE LISLE-WOODRIDGE FIRE PROTECTION DISTRICT.

adopted by said Board of Trustees at its meeting on the 24th day of May 2016.

I do further certify that a quorum of said Board of Trustees was present at the said meeting, and that the Board complied with all requirements of the Illinois Open Meetings Act. Further, I certify that the Resolution has not been amended or altered and is in full force and effect as of the date indicated below.

IN WITNESS WHEREOF, I have hereunto set my hand this 24th day of May 2016.

[Signature]
Secretary, Board of Trustees
Lisle-Woodridge
Fire Protection District
Resolution No. 16-11

A Resolution to Appoint Nancy McClain as IMRF Authorized Agent for the Lisle Woodridge Fire Protection District.

Presented and Passed by the Board of Trustees on May 24, 2016

BE IT RESOLVED, by the Board of Trustees of the Lisle Woodridge Fire Protection District, DuPage and Will Counties, Illinois, hereby appoints Nancy McClain as IMRF Authorized Agent for the Lisle Woodridge Fire Protection District.

PRESENTED to the Board of Trustees of the Lisle Woodridge Fire Protection District, Illinois this 24th day of May, 2016.

PASSED by the Board of Trustees of the Lisle Woodridge Fire Protection District, Illinois, the 24th day of May, 2016.

APPROVED by the Board of Trustees of the Lisle Woodridge Fire Protection District, Illinois this 24th day of May, 2016.

[Signature]
President
Board of Trustees

ATTEST:

[Signature]
Secretary
Board of Trustees

TRUSTEE VOTE:
Ayes: Chaffin, Cottin, Perry, Frank
Nays: 0
Absent: Moeller
Abstain: 0
**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.

<table>
<thead>
<tr>
<th>EMPLOYER NAME</th>
<th>Lisle Woodridge Fire Protection District</th>
<th>EMPLOYER IMRF I.D. NUMBER</th>
<th>05461</th>
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</thead>
<tbody>
<tr>
<td>AUTHORIZED AGENT'S SALUTATION</td>
<td>Dr. ☐ Mr. ☑ Mrs. ☐ Ms.</td>
<td>LAST NAME</td>
<td>Nancy McClain</td>
</tr>
<tr>
<td>FIRST NAME</td>
<td>Middle Initial</td>
<td>Jr., Sr., II, ETC.</td>
<td>Nancy McClain</td>
</tr>
<tr>
<td>TYPE OF GOVERNING BODY</td>
<td>Fire District</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DATE APPOINTMENT MADE (MM/DD/YYYY)</td>
<td>05/24/2016</td>
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<tr>
<td>EFFECTIVE DATE OF APPOINTMENT (MM/DD/YYYY)</td>
<td>05/24/2016</td>
<td></td>
<td></td>
</tr>
<tr>
<td>POSITION TITLE</td>
<td>Administrator</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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
  - Yes ☑ No ☐
- To cast a Ballot for Election of an Executive Trustee of IMRF
  - Yes ☑ No ☐

**CERTIFICATION**

I, Chad Chaffin, do hereby certify that I am Secretary of the Lisle Woodridge Fire Protection District and the keeper of its books and records and the foregoing appointment and delegation were made by resolution duly adopted on the date indicated.

**BUSINESS ADDRESS**

All correspondence and communications with the Authorized Agent are to be addressed as follows:

| NAME (IF DIFFERENT FROM ABOVE) | Mrs. ☐ ☑ Ms. |
| BUSINESS ADDRESS | 1005 Lisle St. |
| CITY STATE AND ZIP + 4 | Lisle, IL 60532 |
| DAYTIME TELEPHONE NO. (with Area Code) | (630) 353-3000 |
| ALTERNATE TELEPHONE NUMBER (with Area Code) | |
| FAX NO. (with Area Code) | |
| EMAIL ADDRESS | nmcclain@lwfd.org |

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) 708-4289
IMFR Form 2.20 (Rev. 10/2014) www.imrf.org