For Customer Use:
_____I have an existing Acct. # 2220-57881
This resolution is for:
_____New Account
_____Change to Existing Acct. # _____

For OTFS Use Only:	
_____Acct Approved	_____Auth Entered.
_____Audit	_____Wire Instructions
_____Addr Entered	_____Wire Templates
Approval:	
_____AD1	_____AD2
Res. form 2000A	

GEORGIA FUND 1
(local government investment pool)
RESOLUTION TO AUTHORIZE INVESTMENT

WHEREAS, Ga. Code Ann. §§36-83-1 to 36-83-8 authorizes Georgia local governments and other authorized entities to invest funds through the local government investment pool, and

WHEREAS, from time to time it may be advantageous to the **City of Sandy Springs** to deposit funds available for
(Name of Local Government, Political Subdivision or State Agency)
investment in Georgia Fund 1 (hereinafter referred to as the local government investment pool) as it may deem appropriate; and

WHEREAS, to provide for the safety of such funds deposited in the local government investment pool, investments are restricted to those enumerated by Ga. Code Ann. §36-83-8 under the direction of the State Depository Board, considering first the probable safety of capital and then the probable income to be derived; and *WHEREAS*, such deposits must first be duly authorized by the governing body of the local government or authorized entity and a certified copy of the resolution authorizing such investment filed with the Treasurer of the Office of the State Treasurer; and

WHEREAS, such resolution must name the official(s) authorized to make deposits or withdrawals of funds in the local government investment pool; and

WHEREAS, Ga. Code Ann. §36-83-8 requires a statement of the approximate cash flow requirements of the participating government pertaining to the funds to accompany the authorization to invest such funds at the time such deposits are duly authorized;

NOW, THEREFORE BE IT RESOLVED by the **Sandy Springs City Council**
(Board, Council or other Governing Body)
that funds of the **City of Sandy Springs** may be deposited from time to
(Local Government, Political Subdivision, or State Agency)
time in the manner prescribed by law and the applicable policies and procedures for the local government investment pool.

BE IT FURTHER RESOLVED THAT:

1. Any one of the following individuals shall be authorized to deposit and/or withdraw funds from the local government investment pool on behalf of such government or other authorized entity (if a listed individual is employed by an entity other than the depositor, indicate employer):

Name, Title, (Employer, if applicable)	(Area Code)	Phone Number
John McDonough, City Manager	**770**	**206-1414**
Email: **JMcDonough@SandySpringsGA.gov**		
Karen Ellis, Finance Director	**770**	**206-1457**
Email: **KEllis@SandySpringsGA.gov**		
Email:		
Email:		
Email:		

All withdrawals from the local government investment pool shall be wired to the following participant's demand deposit account: ***(Many banks have separate instructions for wires and ACH deposits. Please verify both sets of instructions with your bank and provide them below. This will ensure accurate delivery of your funds to the designated bank account).***

(For ACH) **PNC Bank, NA** (Local Bank Name) **Operating Account** (Account Title)

(ABA Number)	(Account Number)	(City, State)
054000030	**5325204098**	

(For WIRE) **PNC Bank, NA** (Local Bank Name) **Operating Account** (Account Title)

(ABA Number)	(Account Number)	(City, State)
031000053	**5325204098**	

(If applicable) Our local bank prefers to receive credit for wire transfers at the following **Correspondent Bank**:

_____
(Bank Name) (City) (ABA Number) (Account Number)

Additional Bank Account (if applicable):

(For ACH) _____ _____
(Local Bank Name) (Account Title)

_____ _____ _____
(ABA Number) (Account Number) (City, State)

(For WIRE) _____ _____
(Local Bank Name) (Account Title)

_____ _____ _____
(ABA Number) (Account Number) (City, State)

Correspondent Bank (if applicable):

_____
(Bank Name) (City) (ABA Number) (Account Number)

3. The local government investment pool shall mail the monthly statements of account to:

Karen Ellis
(Attention)
City of Sandy Springs
(Address)
7840 Roswell Road Building 500
(Address)

(City,State&Zip)

4. Changes in the above authorization shall be made by cancellation or replacement resolution delivered to the Office of the State Treasurer. Until such a replacement resolution is received by the Office of the State Treasurer, the above authorized individuals, local government demand account instructions and statement mailing address(es) shall remain in full force and effect.

5. The following schedule represents the period in which existing balances are currently expected to remain invested in the local government investment pool:

_____% 30 days or less;
_____% more than 30 days but less than 90 days;
_____% 90 days or longer.
100 %

Entered at Sandy Springs, Georgia this 6th day of March 20 12.

Eva Galambos
(Signature of Head of Governing Authority)

EVA Galambos
(Please Print or Type - Head of Governing Authority)

Mayor
(Title)

NOTARY SEAL
MICHAEL D. CASEY
MY COMMISSION EXPIRES
NOTARY
PUBLIC
JANUARY 11, 2013
CHEROKEE COUNTY, GEORGIA

Sworn to and subscribed before me this 6th day of March 20 12.

Michael D Casey
(Notary Public)

Please complete and return an original copy to:

Georgia Fund 1
Office of the State Treasurer
200 Piedmont Avenue
Suite 1204, West Tower
Atlanta, GA 30334-5527

Telephone: **(404) 651-8964 or (404) 656-2993**
Toll Free: **(800) 222-6748**
Fax: **(404) 656-9048**

Georgia Fund 1 (local government investment pool) deposits are not guaranteed or insured by any bank, the Federal Deposit Insurance Corporation (FDIC), the Federal Reserve Board, the State of Georgia or any other agency.