



A resolution authorizing _____ to join with other Local Governments as a Participant in the Colorado Local Government Liquid Asset Trust (the "Trust") in order to pool funds for investment.

WHEREAS, pursuant to Part 7, Article 24 (C.R.S.), it is lawful for any Local Government to pool any moneys in its treasury, which are not immediately required to be disbursed, with the same such moneys in the treasury of any other Local Government in order to take advantage of short-term investments and maximize net interest earnings; and

WHEREAS, the Trust is a statutory trust formed under the laws of the State of Colorado in accordance with the provisions of Parts 6 and 7, Article 24 and Articles 10.5 and 47 of Title 11 of the Colorado Revised Statutes regarding the investing, pooling for investment and protection of public funds; and

WHEREAS, _____ desires to become a Participant in the Trust.

NOW, THEREFORE, it is hereby RESOLVED as follows:

1. _____ hereby approves and adopts, and thereby joins as a Participant with other Local Governments pursuant to Part 7, Article 75, Title 24 of the Colorado Revised Statutes, that certain Amended and Restated Indenture of Trust entitled the Colorado Liquid Government Asset Trust dated October 3, 2003 as amended from time to time, the terms of which are incorporated herein by this reference and a copy of which shall be filed with the minutes of the meeting at which this Resolution was adopted; and
2. The Designee and Authorized Signatories are those persons listed on the Trust Registration Form attached hereto and incorporated herein. The Authorized Signatories are authorized by the Participant to direct the investment of such Participants' investment funds.
3. The Designee and Authorized Signatories may be changed from time to time by written notice to COLOTRUST; and
4. The Trust has two investment portfolios; COLOTRUST PRIME comprised of U.S. Treasury securities and COLOTRUST PLUS+ comprised of U.S. Treasury Securities, U.S. Agency Securities, and the highest rated commercial paper. The Designee is hereby authorized to invest in:

- COLOTRUST PRIME
- COLOTRUST PLUS+
- Both

The undersigned hereby certifies that: _____ has enacted:

- This Resolution, or
- Another form of Resolution, a copy of which is enclosed and that such Resolution is a true and correct copy of the original which is in my possession.

Signature of Secretary or Clerk

Date



TRUST REGISTRATION

Local Government Name (Participant) _____

Mailing Address _____

City _____ Zip _____

Participant's County _____ Tax ID _____ Fiscal Year (Month/Day) _____

Entity Type City/Town County School District Special District Other (Specify) _____

The Colorado Local Government Liquid Asset Trust is hereby authorized to honor any written, telephone, faxed or electronic request, believed to be authentic, for withdrawal of funds from the Trust. The withdrawal proceeds can be sent only to the commercial bank indicated below or mailed to the name and address in which the account is registered, unless changed by written instructions to the Trust. Each local government is responsible for notifying the Trust of any changes to its account.

Bank Name _____ Bank Routing Number (ABA) _____

Account Title _____ Account Number _____

Bank Contact Person _____ Bank Contact's Phone Number _____

Key Contact

Mr. Ms. _____
Print First and Last Name

_____ Title

_____ Signature (required if authorized signer)

_____ Phone

_____ Email

_____ Fax

Permissions

Authorized Signer to Move Funds

Read Only Access

Voting Contact

Alternate Designee

Email Notifications

Monthly Statements

Transaction Confirmations

Online Account

Online User Access

Designee Contact for Voting

Mr. Ms. _____
Print First and Last Name

_____ Title

_____ Signature (required if authorized signer)

_____ Phone

_____ Email

_____ Fax

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Read Only Access

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Monthly Statements

Transaction Confirmations

Online Account

Online User Access



Additional Contact (Optional)

Mr. Ms. _____
Print First and Last Name

_____ Title

_____ Signature (required if authorized signer)

_____ Phone

_____ Email

_____ Fax

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