

CITY OF ARDMORE
Finance Department

Council Letter No. 5481
Meeting Date: July 18, 2022

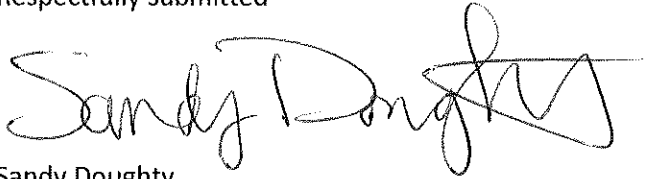
Mayor and City Commission
City of Ardmore, Oklahoma

Re: Authorized Signer added to OkMRF

Dear Commission Members:

Consider and Take Action to add an authorized signer to Oklahoma Municipal Retirement Fund (OkMRF) retirement account Lanell James the new Human Resource Director, is an authorized signer for new hires, retirees, and Lump-Sum Distribution.

Respectfully submitted



Sandy Doughty

Finance Director

Reviewed by: 
City Manager



AUTHORIZED SIGNER DESIGNATION PROCESS

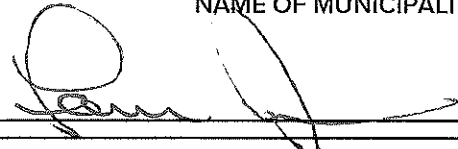
This form allows the Authorized Agent (AA) to designate another person as an Authorized Signer (AS). The Authorized Signer will be able to sign forms as an alternative to the Authorized Agent, the Authorized Signer will also be listed as an alternate form of contact for any questions that OkMRF may have regarding the Plan(s).

AUTHORIZED AGENT (AS APPOINTED BY THE GOVERNING BODY) (Please print clearly using black or blue ink)

NAME: Sandra Doughty
PHONE: (580) 221-2854
EMAIL: sdoughty@ardmorecity.org
PLAN(s): City of Ardmore
NAME OF MUNICIPALITY OR ENTITY

AUTHORIZED SIGNER INFORMATION (Please print clearly using black or blue ink)

PLEASE SELECT ONE: ADD SIGNER DELETE SIGNER
NAME: Lanell James
PHONE: (580) 221-5400
EMAIL: ljames@ardmorecity.org
PLAN(s): City of Ardmore
NAME OF MUNICIPALITY OR ENTITY

SIGNATURE OF AUTHORIZED SIGNER: 

AUTHORIZATION

I _____ (AA name), as Authorized Agent for _____
_____ (Plan Names) have been designated to act as the agent of the Employer(s) in matters pertaining to the Plan(s) and the fund. I understand that it is my responsibility to notify OkMRF of any additions or deletions of Authorized Signers.

SIGNATURE OF AUTHORIZED AGENT: _____

PLEASE RETURN THIS FORM TO OkMRF
MAIL: 1001 NW 63rd, SUITE 260, OKLAHOMA CITY, OK 73116
EMAIL: GCUDJOE@OKMRF.ORG
FAX: (405) 606-7879



Oklahoma Municipal Retirement Fund
AUTHORIZED AGENT NOTIFICATION FORM

AUTHORIZED AGENT DESIGNATION PROCESS

An Authorized Agent shall be designated in writing by the Plan's Retirement Committee (governing body) and shall act as the agent of the Employer in matters pertaining to the Plan and the Fund to centralize in one person the local administration and coordination of Plan activities including contribution and payroll information, forms and applications for Plan participants and to assist Participants, the Employer and Committee regarding Plan matters. Please refer to the Authorized Agent Role and Responsibilities section of this form or the plan document for specific duties.

If you, as Authorized Agent, want to designate another Authorized Signer (please complete a Notice of Authorized Signer).

AUTHORIZED AGENT INFORMATION (Please print clearly using black or blue ink)

NAME OF MUNICIPALITY OR ENTITY: City of Ardmore

FEDERAL TAX ID NUMBER: 73-6005072

APPROVED AUTHORIZED AGENT: Sandra Doughty

TITLE: Finance Director

AUTHORIZED AGENT SIGNATURE: [Handwritten Signature]

EFFECTIVE DATE: July 1, 2022

MAILING ADDRESS: 23 S Washington St, Ardmore, OK 73401

PHONE NUMBER: (580) 221-2584 FAX NUMBER: (580) 221-2563

EMAIL ADDRESS: sdoughty@ardmorecity.org

AUTHORIZATION

The undersigned hereby certifies that the foregoing information was introduced before the (governing body) of Oklahoma and was duly approved on the day of , 20

City of

By:

Title: (Mayor or Chairman)

Date

Seal

City Clerk

PLEASE CONTINUE TO PAGE 2 FOR AUTHORIZED AGENT'S ROLE AND RESPONSIBILITIES DEFINITION

AUTHORIZED AGENT ROLE AND RESPONSIBILITIES

EXCERPT FROM SECTION 9.1 (b) OF THE MASTER DEFINED BENEFIT PLAN

Authorized Agent: An Authorized Agent shall be designated in writing by the Committee and shall act as the agent of the Employer (but not the agent of the Trustees or the Trust Service Provider of the Oklahoma Municipal Retirement Fund the "Fund") in matters pertaining to the Plan and the Fund, to centralize in one person the local administration and coordination thereof, and to file payroll and contribution information, to file claims, forms and applications for Participants, and to advise Participants, the Employer and the Committee. The Authorized Agent, under the control and direction of the Committee, shall have such general duties as the Employer and the Committee may deem necessary and proper for such purposes, which duties shall include but not be limited to, the following:

- (1) to coordinate the deduction of Participant contributions and to see that Employer and Participant contributions are properly received and forwarded promptly to the Fund for management and investment;
- (2) to forward any communications directed to Participants and Beneficiaries by the Trustees, the Trust Service Provider or the Fund;
- (3) to lend assistance to Participants and Beneficiaries in filing applications for benefits, and in communicating with the Employer, the Committee and the Trustees or the Trust Service Provider of the Fund and to forward such communications to the addressees;
- (4) to keep the Employer and Committee informed regarding Employer contribution rates and funds required to meet the costs of the Plan;
- (5) to assist the Committee in determining whether Employees are eligible for participation in the Plan;
- (6) to certify at the direction of the Committee that an Employee is on an Authorized Leave of Absence, paid or unpaid; and
- (7) to file at the direction of the Committee a petition or nomination and cast a ballot for election of Trustees of the Fund.

EXCERPT FROM SECTION 10.1 (b) OF THE MASTER DEFINED CONTRIBUTION PLAN

Authorized Agent: An Authorized Agent shall be designated in writing by the Committee and shall act as the agent of the Employer (but not the agent of the Trustees or the Trust Service Provider of the Oklahoma Municipal Retirement Fund the "Fund") in matters pertaining to the Plan and the Fund, to centralize in one person the local administration and coordination thereof, and to file payroll and contribution information, to file claims, forms and applications for Participants, and to advise Participants, the Employer and the Committee. The Authorized Agent, under the control and direction of the Committee, shall have such general duties as the Employer and the Committee may deem necessary and proper for such purposes, which duties shall include but not be limited to, the following:

- (1) to coordinate the deduction of Participant contributions and to see that Employer and Participant contributions are properly received and forwarded promptly to the Fund for management and investment;
- (2) to forward any communications directed to Participants and Beneficiaries by the Trustees, the Trust Service Provider or the Fund;
- (3) to lend assistance to Participants and Beneficiaries in filing applications for benefits, and in communicating with the Employer, the Committee and the Trustees or the Trust Service Provider of the Fund and to forward such communications to the addressees;
- (4) to assist the Committee in determining whether Employees are eligible for participation in the Plan;
- (5) to certify at the direction of the Committee that a Participant is on an authorized leave of absence, paid or unpaid; and
- (6) to file at the direction of the Committee a petition or nomination and cast a ballot for election of Trustees of the Fund.