
**THE CITY OF BLUE ISLAND
COOK COUNTY, ILLINOIS**

**RESOLUTION
NUMBER 2019-032**

**A RESOLUTION APPOINTING AN AUTHORIZED AGENT TO ACT
ON BEHALF OF THE CITY OF BLUE ISLAND WITH RESPECT TO
ALL OFFICIAL BUSINESS CONCERNING THE
ILLINOIS MUNICIPAL RETIREMENT FUND**

**DOMINGO F. VARGAS, Mayor
Randy Heuser, City Clerk**

**DEXTER JOHNSON
FRED BILOTTO
NANCY RITA
TOM HAWLEY
MICHAEL MECH
CANDACE CARR
ALECIA SLATTERY**

**ANNETTE ALEXANDER
WILLIAM CAZARES
KEVIN DONAHUE
BILL FAHRENWALD
JOHNNY RINGO HILL
RAEANN CANTELO-ZYLMAN
JAMES KLINKER**

Aldermen

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THE ILLINOIS MUNICIPAL RETIREMENT FUND.**

WHEREAS, it is necessary that the City of Blue Island appoint an authorized agent to act on its behalf with respect to conducting official business concerning the City and the Illinois Municipal Retirement Fund.

NOW THEREFORE BE IT RESOLVED that the Mayor and City Council as follows:

SECTION ONE

Michael V. Marzal, Director of Finance and Administration of the City of Blue Island, is hereby appointed as the Authorized Agent for the City of Blue Island to act on its behalf with respect to conducting all official business concerning the City and the Illinois Municipal Retirement Fund. As authorized agent, Michael V. Marzal shall have those powers and duties set forth in the Illinois Pension Code, 40 ILCS 5/7-135 (2012).

SECTION TWO

This Resolution shall be in effect from and after its passage and approval as provided by law.

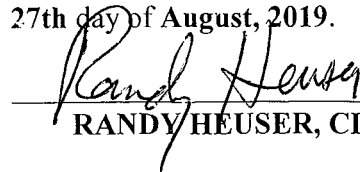
ADOPTED this 27th day of **August, 2019**, pursuant to a roll call vote as follows:

	YES	NO	ABSENT	PRESENT	ABSTAIN
Alderman Johnson			X		
Alderman Alexander	X				
Alderman Bilotto	X				
Alderman Cazares			X		
Alderman Rita	X				
Alderman Donahue	X				
Alderman Hawley	X				
Alderman Fahrenwald	X				
Alderman Mech	X				
Alderman Hill	X				
Alderman Cantelo-Zylman	X				
Alderman Carr	X				
Alderman Slattery			X		
Alderman Klinker	X				
Mayor Vargas					
TOTAL	11		3		

APPROVED by the Mayor on **August 27, 2019**.

DOMINGO F. VARGAS
MAYOR OF THE CITY OF BLUE ISLAND,
COUNTY OF COOK AND STATE OF ILLINOIS

ATTESTED and **Filed** in my office this
 27th day of **August, 2019**.



RANDY HEUSER, CITY CLERK



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 City of Blue Island		EMPLOYER IMRF I.D. NUMBER	
AUTHORIZED AGENT'S SALUTATION <input type="checkbox"/> Dr. <input checked="" type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.	LAST NAME Marzal	FIRST NAME Michael	MIDDLE INITIAL JR., SR., II, ETC. V
TYPE OF GOVERNING BODY City Council			
DATE APPOINTMENT MADE (MM/DD/YYYY) 08/27/2019	EFFECTIVE DATE OF APPOINTMENT (MM/DD/YYYY) 08/27/2019	POSITION TITLE Director of Finance & Administration	
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 type="checkbox"/> Yes	<input type="checkbox"/> No
To cast a Ballot for Election of an Executive Trustee of IMRF		<input type="checkbox"/> Yes	<input type="checkbox"/> No
X			
SIGNATURE OF AUTHORIZED AGENT NAMED ABOVE		DATE (MM/DD/YYYY)	
CERTIFICATION			
I, <u>Randy Hueser</u>		do hereby certify that I am <u>City Clerk</u>	
NAME of the <u>City of Blue Island</u>		CLERK OR SECRETARY	
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		<u>Randy Hueser</u> SIGNATURE OF CLERK OR SECRETARY	
BUSINESS ADDRESS			
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. Michael V. Marzal			
BUSINESS ADDRESS			
13051 Greenwood Avenue			
CITY STATE AND ZIP + 4			
Blue Island, IL 60406			
DAYTIME TELEPHONE NO. (with Area Code)		ALTERNATE TELEPHONE NUMBER (with Area Code)	
(708) 396-7066		(708) 567-2024	
FAX NO. (with Area Code)		EMAIL ADDRESS	
(708) 597-1221		mmarzal@cityofblueisland.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) 706-4289