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	EMPLOYER IMRF I.D. NUMBER
Village of Orland Park	

AUTHORIZED AGENT'S SALUTATION	LAST NAME	FIRST NAME	MIDDLE INITIAL	JR., SR., II, ETC.
☐ Dr. ☑ Mr. ☐ Mrs. ☐ Ms.	Wachtel,	Kevin		

TYPE OF GOVERNING BODY
Village

DATE APPOINTMENT MADE (MM/DD/YYYY)	EFFECTIVE DATE OF APPOINTMENT (MM/DD/YYYY)	POSITION TITLE
12/20/2021	12/20/2021	Finance Director

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

X Ken Wachtel — 12/21/2021

SIGNATURE OF AUTHORIZED AGENT NAMED ABOVE — DATE (MM/DD/YYYY)

CERTIFICATION

I, Patrick R. O'Sullivan (NAME), do hereby certify that I am Village Clerk (CLERK OR SECRETARY) of the Village of Orland Park (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

Patrick R. O'Sullivan
SIGNATURE OF CLERK OR SECRETARY
By: Alexandra Smith, Deputy Clerk

BUSINESS ADDRESS

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

NAME (*IF DIFFERENT FROM ABOVE*)
Ms. ☐ Mrs. ☐ Ms.

BUSINESS ADDRESS
14700 S. Ravinia Avenue

CITY STATE AND ZIP + 4
Orland Park, IL 60462

DAYTIME TELEPHONE NO. (with Area Code)	ALTERNATE TELEPHONE NUMBER (with Area Code)
708-403-6199	
FAX NO. (with Area Code)	**EMAIL ADDRESS**
	kwachtel@orlandpark.org