RESOLUTION NO.: 12-04 **DATED:** 2/10/2012

A RESOLUTION AUTHORIZING APPLICATION TO THE DIRECTOR OF INDUSTRIAL RELATIONS, STATE OF CALIFORNIA FOR A CERTIFICATE OF CONSENT TO SELF INSURE WORKERS' COMPENSATION LIABILITIES

At a meeting of the Board of DIRECTORS
(enter title)

of the TRINDEL INSURANCE FUND,
(enter name of public agency, district)

a JOINT POWERS AUTHORITY organized and existing under the laws of the State of California,
(enter type of agency)

held on the Tenth day of Feburary, 19 2012, the following resolution was adopted:

RESOLVED, that the EXECUTIVE DIRECTOR AND DIRECTOR OF WORKERS' COMPENSATION
(enter position titles)

be and they are hereby severally authorized and empowered to make application to the Director of Industrial Relations, State of California, for a Certificate of Consent to Self Insure workers' compensation liabilities on behalf of the

TRINDEL INSURANCE FUND
(enter name of district)

and to execute any and all documents required for such application.

I, Rita Sherman, the undersigned President
(enter name) (enter title)

of the Board of the said TRINDEL INSURANCE FUND,
(enter name of agency)

a JOINT POWERS AUTHORITY, hereby certify that I am the President
(enter type of agency) (enter title)

of said JOINT POWERS AUTHORITY, that the foregoing is a full, true and correct copy of the
(enter type of agency)

resolution duly passed by the Board at the meeting of said Board held on the day and at the place therein specified and that said resolution has never been revoked, rescinded, or set aside and is now in full force and effect.

IN WITNESS WHEREOF: I HAVE SIGNED MY NAME AND AFFIXED THE SEAL OF THIS

Seal

TRINDEL INSURANCE FUND,
(enter type of agency)

THIS Tenth DAY OF February, 19 2012.

(Signature)