Resolution # 21-13: Appointment of Authorized Representatives as required by US Bank

June 24, 2021

APPOINTMENT OF AUTHORIZED REPRESENTATIVE(S)

I, <u>Carol Norman</u> (Name of Authorizing		ected acting President of the Board of Education				
(Name of Authorizing	Official)	(Title)				
	fied School District a(n)					
(Institution Name		(State)				
Education Institut	tion Municipality, Corporation, etc	, do hereby certify that the following have been				
		,				
appointed as an Author	rized Representative(s), at the	e date hereof, and are authorized to act on behalf of the				
above mstitution in ma	tiers relating to <u>Laguna Bea</u>	ach Unified School District Account #164864000 . of bond issue, master financing program, escrow, etc. here)				
also certify that the signatures opposite their names are the signatures of such individuals.						
Name	Title (list multiple titles if					
<u>Name</u>	applicable)	Specimen Signature				
2 00 00		2				
Jason Viloria	Superintendent	\mathcal{A}				
		(1),				
NA: I a la l	Assistant Superintendent					
Michael Conlon	Human Resources					
1-ft D:	Assistant Superintendent	i. A				
Jeff Dixon	Business Services					
Chad Mahami	Assistant Superintendent					
Chad Mabery	Instructional Services	(WM)				
	2411	V				
Witness my signature or	n this day of	ure, 2021.				
(V)		•				
(Signature of Authorizing	n Kendh					
(Signature of Authorizing Official)						

(Note: If there are multiple individuals identified as Authorized Representatives, one of those same individuals may execute the form as the "Authorizing Official". If there is a single individual named as an Authorized Representative, the "Authorizing Official" must be an individual that is not the named Authorized Representative.)

the customer's contractual arrangements with Wells Fargo regarding these services. Additional information may be requested from all named Owners according to Wells Fargo's customer due diligence policies.

Wells Fargo may obtain credit reports or other information about the customer. Wells Fargo may disclose information about each account to its affiliates, to credit reporting agencies, and to other persons or agencies that, in Wells Fargo's judgement, have a legitimate purpose for obtaining the information.

I acknowledge that the customer has received the Wells Fargo Commercial Account Agreement and agrees its terms and conditions, as amended from time to time, will govern the account(s).

Carol Normandin	LBUSD School Board President
Printed Name	Position/Title
(al Vormande	24 June 2021
Authorized Signature	Date

Bank Use Only			
Banker Name Aloha Sabado	Banker Telephone +1 (628) 260-339	6	Banker MAC A0101-093
AU 11783	RAU 11783		Officer # 23570
Submitter Name Rachel Brown		Submitter Phone # +1 (303) 863-5269	

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