



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.

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

NAME OF MUNICIPALITY OR ENTITY: City of Broken Arrow  
FEDERAL TAX ID NUMBER: 73-6005109  
APPROVED AUTHORIZED AGENT: Amber Moreno  
TITLE: Compensation & Benefits Manager  
AUTHORIZED AGENT SIGNATURE: Amber Moreno  
EFFECTIVE DATE: 01/03/2017  
MAILING ADDRESS: 220 S 1st St Broken Arrow, OK 74012  
PHONE NUMBER: (918) 259-2400 FAX NUMBER: (918) 251-9210  
EMAIL ADDRESS: amoreno@brokenarrowok.gov

**AUTHORIZATION**

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

City of City of Broken Arrow

By: \_\_\_\_\_

Title: \_\_\_\_\_  
(Mayor or Chairman)

Certified by: \_\_\_\_\_  
City Clerk

\_\_\_\_\_  
Date

\_\_\_\_\_  
(Seal)

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

**AUTHORIZED AGENT ROLE AND RESPONSIBILITIES**

**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) in matters pertaining to the Plan, the Fund and the Oklahoma Municipal Retirement 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 Oklahoma Municipal Retirement Fund for management and investment;
- 2.To forward any communications directed to Participants and beneficiaries by the Trustees, the Trust Service Provider or the Oklahoma Municipal Retirement 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 Oklahoma Municipal Retirement Fund and to forward such communications to the addressees;
- 4.To assist the Committee in determining whether or not 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 Oklahoma Municipal Retirement Fund.