



Part 2. Authorized Representatives and Signatories

(Below are the individuals authorized to conduct business on behalf of the participating entity)

Authorized Representatives of: Burney Water District
 (Name of Agency)

Minimum Number of Signatories Required to Authorize a Trade: 2

Trustee/Fiduciary Signatures and Online Access

(The total number of Trustees/Fiduciaries signing below must equal or exceed the number of authorized signatories required per trade, as listed on the line above.)

Complete the form below to designate agency contacts and their roles. Please check the appropriate box(es) for each individual. The individual listed as the Primary Contact will be considered the main point-of-contact for the agency's CalTRUST account.

Authorized Signatory Trustee/Fiduciary: The undersigned certify that any of the persons signing below as an authorized signatory of the Participant have the full authority and capacity to invest funds in and withdraw funds from the Shares Program, as well as manage accounts through the CalTRUST Online Portal, pursuant to compliance with the minimum number of authorized traders listed above. The undersigned agree that the certifications, instructions, and authorizations contained in this Program Registration Form and Participation Agreement will remain in effect until CalTRUST receives written notice of change. It is only necessary for individuals certified as an Authorized Signatory to provide a signature.

Online Trading Opt-OUT: Selecting the Opt-OUT indicates that your agency does not allow for the Authorized Signatory to have access to conduct trades online.

Statement Only Access: The individual(s) for which Statement Only Access is selected will be granted access to the CalTRUST Online Participant Portal, but will only be able to access monthly statements and fund information. Authorized Signatories will have this access already and do not need to be indicated here.

Primary Contact

Name: William M. Rodriguez

Title: District Manager

Email: districtmanager@burneywater.org Phone: (530) 335-3582

Signature: _____ Date: 12/17/2020

Select Account Access Option:

Authorized Signatory Trustee/Fiduciary	Online Trading Opt-OUT	Statement Only Online Access
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Secondary Contact

Name: Amanda Rogers

Title: Office Clerk II

Email: arogers@burneywater.org Phone: (530) 335-3582

Signature: _____ Date: 12/17/2020

Select Account Access Option:

Authorized Signatory Trustee/Fiduciary	Online Trading Opt-OUT	Statement Only Online Access
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Additional Representative

Name: Britta Rogers

Title: Director

Email: ospenson@frontiernet.net Phone: (530) 335-4825

Signature: _____ Date: 12/17/2020

Select Account Access Option:

Authorized Signatory Trustee/Fiduciary	Online Trading Opt-OUT	Statement Only Online Access
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Representative

Name: Jim Hamlin

Title: Director

Email: jandjhamlin@yahoo.com Phone: (530) 945-4399

Signature: _____ Date: 12/17/2020

Select Account Access Option:

Authorized Signatory Trustee/Fiduciary	Online Trading Opt-OUT	Statement Only Online Access
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Representative

Name: Fred Ryness

Title: Director

Email: Ryness.fred@gmail.com Phone: (530) 335-4324

Signature: _____ Date: 12/17/2020

Select Account Access Option:

Authorized Signatory Trustee/Fiduciary	Online Trading Opt-OUT	Statement Only Online Access
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Representative

Name: David Barry

Title: Director

Email: 14ddbarr@gmail.com Phone: (530) 355-8638

Signature: _____ Date: 12/17/2020

Select Account Access Option:

Authorized Signatory Trustee/Fiduciary	Online Trading Opt-OUT	Statement Only Online Access
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Representative

Name: Sarah Clark

Title: Director

Email: sbclark@citlink.net Phone: (530) 335-4332

Signature: _____ Date: 12/17/2020

Select Account Access Option:

Authorized Signatory Trustee/Fiduciary	Online Trading Opt-OUT	Statement Only Online Access
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>