RESOLUTION NO. 19-

A RESOLUTION AUTHORIZING THE FOLLOWING PERSONS TO SIGN FOR THE WITHDRAWAL OF MONEY FROM AUTHORIZED DEPOSITORIES OF THE CITY OF ASTORIA.

BE IT RESOLVED BY THE CITY OF ASTORIA:

| Section 1. That the following persons are authorized to sign for the withdrawal of funds from all City depositories: | | | | | |
|--|--|--------------------|---|---------------------|--|
| | Mes | Bruce Jones | Mayor | | |
| | | R. Brett Estes | City Manager | | |
| Suplete | | Susan Brooks | Director of Finance Administrative Ser | | |
| Oppen | | Jennifer Benoit | Executive Secreta | ry | |
| Section 2. A stamped signature for Bruce Jones and/or Brett Estes is acceptable. | | | | | |
| Section 3. | Section 3. Repeal of Resolution. Resolution 17- 05 is hereby repealed. | | | | |
| Section 4. | Effective Date. T | his Resolution is | effective on the d | ate of its passage. | |
| ADOPTED BY THE CITY COUNCIL THIS 7 DAY OF 5, 2019. | | | | | |
| APPROVED BY THE MAYOR THIS DAY OF, 2019. | | | | | |
| | | | Bu Jrs Wayor | | |
| City Manager | | | | | |
| ROLL CALL ON ADO Councilor Browns Herman Rocka | on | YEA X X X | NAY | ABSENT | |
| Mayor Jones | | * | | | |