RESOLUTION 15-17A

BE IT RESOLVED , by authority of the	Board of Supervisors
	(Name of governing body)
of the township of Amity	, Berks County, and it
(Name of MUNICIPALITY)	• A source of
is hereby resolved by authority of the same, that	the <u>Chairperson</u> of
	(designate official title)
said MUNICIPALITY be authorized and directe	d to sign the attached Agreement on its behalf.
ATTEST:	Amity Township
mila Kival, Secretary	(Name of MUNICIPALITY)
	By: Chairperson
(Signature and designation of official title)	(Signature and designation of official title)
I,Kim_McGrath(Name)	Chairperson, Board of Supervisors (Official title)
of the Amity Township, Board of Supervision (Name of governing body and MUN	, at the total function of the total functio
is a true and correct copy of the Resolution adopte	
Amity Township Board of Supervisors (Name of governing body)	_, held the $\frac{2^{nd}}{2^n}$ day of September, 2015 .
DATE: 922015	(Signature and designation of official title)

NOTE: Signature on the Department signature page of this Agreement must conform with signature on this Resolution.