

**ATLANTIC COUNTY
MUNICIPAL JOINT INSURANCE FUND**

RESOLUTION 2020-19

HONORING INGRID PEREZ

WHEREAS, the Atlantic County Municipal Joint Insurance Fund has been organized pursuant to N.J.S.A. 40A:10-36 et seq., and

WHEREAS, the Commissioners of the Atlantic County Municipal Joint Insurance Fund find it appropriate to recognize a Fund Commissioner of the Atlantic County Municipal Joint Insurance Fund, and

WHEREAS, **Ingrid Perez**, Fund Commissioner from the Township of Hamilton, and in her capacity as aforesaid, has been a distinguished Commissioner of the Atlantic County Municipal Joint Insurance Fund, and the Fund is desirous of celebrating her tenure as Fund Chair; and

WHEREAS, **Ingrid Perez**, was elected as the Fund Chair, by her peers, a position she served with characteristic skill, keeping foremost the well-being of the Fund and her fellow Commissioners; and

WHEREAS, the Atlantic County Municipal Joint Insurance Fund wishes to recognize **Ingrid Perez**, for her approach to decision-making; her careful attention to and her assistance in promulgating Fund policies and procedures; her determination to ensure that the Fund would operate in a consistent, orderly and fair manner; and above all her unwavering dedication to achieving the ultimate goals of the Fund.

NOW, THEREFORE, BE IT PROCLAIMED, by the Commissioners of the Atlantic County Municipal Joint Insurance Fund assembled in a public session on **January 15, 2020**, that this body does hereby honor and congratulate **Ingrid Perez** for her unselfish and dedicated service as Fund Chair; and

BE IT FURTHER PROCLAIMED that the members of the Atlantic County Municipal Joint Insurance Fund extend to **Ingrid Perez** their best wishes on the occasion of her retirement as Fund Chair.

BE IT FURTHER RESOLVED that a copy of this Resolution shall be provided to the Mayor and Council of the Township of Hamilton for their information and attention.

This Resolution was duly adopted by the Atlantic County Municipal Joint Insurance Fund at a public meeting held on January 15, 2020

**ATLANTIC COUNTY
MUNICIPAL JOINT INSURANCE FUND**

BY: _____

[Signature]
CHAIR

ATTEST: _____

[Signature]
SECRETARY

January 15, 2020

DATE