

**RESOLUTION**

**APPOINTMENT OF A FUND COMMISSIONER TO THE  
FIRST RESPONDER JOINT INSURANCE FUND**

**BE IT RESOLVED**, by the (Name of Fire District) \_\_\_\_\_,

County of \_\_\_\_\_, State of New Jersey, that it hereby appoints

\_\_\_\_\_ as the Fund Commissioner and \_\_\_\_\_

as the Alternate Fund Commissioner for the First Responder Joint Insurance Fund;

and

**BE IT FURTHER RESOLVED** that copies of this Resolution be forwarded to the

following:

1. \_\_\_\_\_  
(Fund Commissioner)
2. \_\_\_\_\_  
(Alternate Fund Commissioner)
3. First Responder Joint Insurance Fund

I hereby certify the foregoing to be a true copy of a Resolution adopted by \_\_\_\_\_

\_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_,

20\_\_\_\_\_.

INTRODUCED BY: \_\_\_\_\_

SECONDED BY: \_\_\_\_\_

ROLL CALL  
APPROVE: \_\_\_\_\_

OPPOSE: \_\_\_\_\_