

**DUKES COUNTY POOLED OPEB TRUST
Questionnaire & Agreement**

- | | | |
|--|--------------------------|--------------------------|
| | Yes | No |
| 1. Have you voted to join the Dukes County Pooled OPEB Trust? If no, go to question 4. | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Have you executed the "Joinder Agreement" ? If so, please keep a copy and send the original to Kathy Logue, Chairman of the OPEB Trust. | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Who have you appointed as a Trustee? Alternate? | | |
| Trustee: _____ | | |
| Alternate: _____ | | |
| 4. Have you appropriated any money to begin funding your OPEB liability? | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, what amount have you appropriated to date? | \$ _____ | |
| Do you plan to send those funds to the Dukes County Polled OPEB Trust? | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, what approximate amount do you plan to appropriate going forward? | \$ _____ | |
| 5. Do you wish to take part in the GASB 43/45 actuarial study? See Agreement below. | <input type="checkbox"/> | <input type="checkbox"/> |
| Who will be your contact/representative for the Actuarial Study? | | |
| Contact: _____ | | |

AGREEMENT

The _____ (town, school, district) would like to participate in the GASB 43/45 actuarial study that the the Dukes County Pooled OPEB Trust will have performed during the fall of 2011.

Following are terms of the project:

- We will respond within the scheduled time frame to accommodate all units
- We will provide acceptable data in electronic format on Excel spreadsheets
- We agree to pay our proportionate share of the costs (\$20,000- \$30,000) based on the number of employees and retirees within our unit.

ACCEPTED AND AGREED this _____ day of _____, 2011

BY: _____ Title: _____

BY: _____ Title: _____

BY: _____ Title: _____

BY: _____ Title: _____