

Accident and Disability Fund known as the Firefighters' Cancer Benefit Program (the "Fund(s)"); and,

WHEREAS, ACCG-IRMA has also established a second Supplemental Medical, Accident, and Disability Fund known as the First Responder PTSD Program for the purpose of protecting against certain other liabilities imposed upon Georgia counties by state law; and,

WHEREAS, the governing authority of the County of Lowndes finds that it is in the best interest of its citizens to participate in this second ACCG-IRMA Supplemental Medical, Accident, and Disability Fund (the First Responder PTSD Program),

NOW THEREFORE, BE IT RESOLVED by the governing authority of the County of Lowndes, Georgia:

SECTION 1

The governing authority of the County of Lowndes hereby authorizes the County to become a participant in the ACCG-IRMA Supplemental Medical, Accident, and Disability Fund known as the First Responder PTSD Program for the purpose of providing coverage for those risks imposed upon the County by state law and for which the Supplemental Medical, Accident, and Disability Fund has been established. The County's continuing participation in the ACCG-IRMA Fund(s) in which the County is currently enrolled is hereby confirmed.

SECTION 2

The _____ Chairman _____ of the County
(Insert Title of Chief Executive Officer)
of Lowndes is authorized to execute on behalf of the County any and all documents necessary and proper to become a participant in the ACCG-IRMA Supplemental Medical, Accident, and Disability Fund known as the First Responder PTSD Program.

SECTION 3

The powers of ACCG-IRMA, unless the intergovernmental contract and ACCG-IRMA bylaws are amended, shall be limited to those authorized by Chapter 85