

**MET PROGRAM REGISTRATION FORM PRB-150**

**Retirement System Profile**

City of El Paso Employees Retirement Trust	(915) 212-1786
System Name	Phone Number
David Garcia	garciadx1@elpasotexas.gov
Report Contact Name (Please Print)	E-mail

**Changes to the Board**

Names of Outgoing Trustees/System Administrators
Mario Hernandez - Term Ended 4/30/2023
Diana Nunez - Term Ended 04/30/2023

**System Administrator**

Name	Title
Phone Number	Fax Number
E-mail	Date of Hire

**Note:** Please use as many pages as needed for additional trustees.

**Trustee**

Karina Brasgalla	123 W Mills Avenue, Suite 111, El Paso, TX 79901	
Name	Mailing Address	
(915) 224-8185	bragallakx@elpasotexas.gov	
Phone Number	E-mail	
Trustee	Active Participant	
Position (Chair, Vice-Chair, Secretary, etc.)	Trustee Type (Active, Retired, Citizen, Employer, etc.)	
4 yrs	05/01/2023	04/30/2027
Term Length	Term Start Date	Term End Date

**CERTIFICATION**

I hereby certify that the information provided above is complete and accurate and that I am duly authorized by the pension system to complete this form.

**Note:** For e-mail submissions, by typing your name on the signature line below, you are signing this document.

 _____ Authorizing Signature	David Garcia _____ Printed Name
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05/05/2023  
 \_\_\_\_\_  
 Date

