Exhibit 6—Modification to Identify Additional Political Entity Joining a Retirement System—One Referendum Held for Entire Retirement System

The purpose of this Identification Modification is to identify political subdivisions which join a retirement system after coverage was previously extended to employees of all participating political subdivisions.

The introductory paragraph identifies the name of the retirement system and the previous modification in which the retirement system coverage group was included in the agreement. The modification lists the name of the political subdivisions which were created after the previous modification was executed.

The last paragraph explains that the purpose of the modification is to identify the political subdivisions which are joining the retirement system coverage group. The parenthetical remark after the name of each of the political subdivisions is for reporting purposes.

Since coverage in this situation is automatic upon the entity's participation in the retirement system, the designation of a date pursuant to Section 218(e)(2) of the Act is not applicable.

MODIFICATION (Insert No.)

TO STATE SOCIAL SECURITY AGREEMENT

IOSIAIE	SOCIAL SECURITY AGREEMENT
representative designated to administer in original agreement executed), hereby agreerformed by the employees of each political political representations.	d the State of, acting through its ts responsibilities under the agreement of {date ree that said agreement shall apply to services itical subdivision listed herein in positions m) as it appears in Modification No
Hunt School District. Hunt County	
, as shown in Modifi	e (name of retirement system) coverage group is cation No The first date this political covered by the (name of retirement system) is
joining the (insert exact full name of reti	entify the additional political subdivisions <i>rement system</i>). All individuals in positions included in the agreement by Modification No. efined in Section 218(d)(4) of the Act.
Approved for the State ofthis	s, 20
Approved thisday of	Name/Title of Designated Official, 20
	Commissioner of Social Security By:
	Regional Commissioner (or authorized delegate) Social Security Administration