VACU internal routing—please forward to Business Services

VIRGINIA Credit Union. AUTHORIZATION DESIGNATION FORM					
Bu	siness Services				
Accour	nt Number(s):				
State of organization (if applicable)					
Type of I	□ S Corporation Select Ta □ Sole Proprietorship □ C = □ Sole S = □ S =	ted Liability Company) Partnership: x Classification: C Corporation S Corporation S Corporation Partnership Partnership	 Unincorporated Organization Association/Club Trust/Estate Other: 		
The following authorization is attached to and is a part of this document: Authorization for Share/Deposit Accounts Dated:					
	ADOPTION BY VOTE OF GOVERNING MEMBERS				
section only.	Note: Do not execute this section if organized as a sole proprietorship, partnership or limited liability company. The undersigned certifies that he/she is the custodian of the corporate seal (if any) and of the minutes and records of the above named Business/Organization and has been authorized and directed to certify to the Credit Union that the following attached documents are true and correct copies of resolutions and agreements duly adopted by a vote of the governing members of the Business/Organization in accordance with the law and, as applicable, the Articles of Incorporation, Bylaws or Code of Regulations, Constitution, Charter and/or rules of the Business/Organization; and that such resolutions have not been withdrawn or changed; and that all of the information provided above is true.				
lon	<u>X</u>				
ا ک ز	Signature	Title	Date		
ě.					
Execute one :	The undersigned adopt on behalf of the Business/Organization the following attached resolutions and agree				
	Name (print)	X Signature X	Date		
	Name (print)	Signature ✔	Date		
	Name (print)	X Signature	Date		
	Name (print)	X Signature X	Date		
	Name (print)	Signature	Date		

Authorization for Share/Deposit Accounts

WHEREAS on this ______ day of ______, 2020, it has been determined that it is in the best interest of Business/Organization to establish a membership in and depository relationship with Virginia Credit Union ("Credit Union").

WHEREAS Business/Organization has considered the terms of the Business Membership and Account Agreement governing accounts established at Credit Union.

NOW, THEREFORE, BE IT RESOLVED AND AGREED, that the Credit Union is hereby designated as a depository of funds belonging to the Business/Organization;

BE IT FURTHER RESOLVED AND AGREED, that the person(s) designated below is (are) designated as an Authorized Signer to establish a depository relationship with Credit Union and is (are) authorized to from time to time open one or more share or deposit account(s) of any type. It is distinctly agreed and understood that the designated Authorized Signer(s) is (are) vested with all power and authority described for an Authorized Signer in the Business Membership and Account Agreement.

BE IT FURTHER RESOLVED AND AGREED, that the Credit Union will be notified promptly and in writing of any change of the Authorized Person(s) identified below, or any change in the ownership, legal structure, or management of the business/organization and upon any dissolution or bankruptcy of the Business/Organization.

BE IT FURTHER RESOLVED AND AGREED, that the Credit Union may rely on any actual or facsimile signature that reasonably resembles the facsimile or specimen signature of an Authorized Signer provided below, in the exercise of any powers granted by the Business Membership and Account Agreement until notified in writing of a change; that the Credit Union shall not be held liable for refusing to honor any signature where the Business/Organization has not provided to the Credit Union a specimen thereof; that the Business/Organization holds the Credit Union harmless from and agrees to indemnify the Credit Union for all claims, demands, losses, costs, damages or expenses including reasonable attorney's fees suffered or incurred by the Credit Union resulting from payments and disbursements made or any other actions the Credit Union takes in good faith in reliance on the actual or facsimile signatures of an Authorized Signer provided that when a signature is required to exercise the authority described in the Business Membership and Account Agreement, the signature of at least one (1) Authorized Signer(s) with respect to share or deposit accounts must appear on the appropriate document. (*The signature of only one (1) Authorized Signer is required if the foregoing blank is not completed.*)

Authorized Person(s) for Share/Deposit Accounts			
		x	
Name (print)	Title	Facsimile/Specimen Signature Authority: INo Limit I Limited to:	
		X	
Name (print)	Title	Facsimile/Specimen Signature Authority: INo Limit I Limited to:	
		X	
Name (print)	Title	Facsimile/S <u>pe</u> cimen Signature Authority: U No Limit U Limited to:	
<u>.</u>		X	
Name (print)	Title	Facsimile/Specimen Signature Authority: INo Limit ILimited to:	

BE IT FURTHER RESOLVED AND AGREED, that as noted below, this Authorization for Share/Deposit Accounts:

- □ Is the first Authorization for Share/Deposit Accounts presented to the Credit Union.
- Expressly revokes and replaces any and all prior Authorizations for Share/Deposit Accounts adopted by the Business/Organization and presented to the Credit Union.
- □ Supplements any and all prior Authorizations for Share/Deposit Accounts adopted by the Business/Organization and presented to the Credit Union.

(If none of the above boxes are checked the Credit Union may assume that this document revokes and replaces any and all prior Authorizations for Share/Deposit Accounts that may be on file.)