

PARTNERSHIP AUTHORIZATION RESOLUTION

The undersigned (“Partners”) certify that they are the only partners or owners of _____ (name of Partnership if a DBA), a Partnership (“Partnership”) organized under the laws of _____ (state), Tax Identification Number _____, and that the resolutions on this document are a true and correct copy of the resolutions adopted at a meeting of the Partners held on _____ (date of meeting).

BE IT RESOLVED THAT, the Partners appoint _____, _____, _____, and _____ [Authorized Signer(s)] to exercise the powers listed below:

- (1) Open, close, maintain, and operate a savings, checking, share certificate or money market account at Purdue Federal Credit Union (“Purdue Federal”);
- (2) Endorse and deposit checks and orders for the payment of money or otherwise, and to sign checks or orders for payment of money, withdraw or transfer funds in the Partnership’s accounts at Purdue Federal;
- (3) Enter into and execute any preauthorized electronic transfer agreements for automatic withdrawals or transfers initiated through an ATM, point-of-sale terminal, telephone, computer using an access device like a debit card, code, or similar means; and
- (4) Enter into and execute wire transfer agreements that authorize transfers by telephone or other communication systems permitted by Purdue Federal.

BE IT RESOLVED THAT, of the Authorized Signers listed above, _____ and _____ also have the authority to do the following:

- (5) Borrow money on behalf and in the name of the Partnership, sign, execute and deliver promissory notes or other evidences of indebtedness; request credit cards; and
- (6) Enter into a lease for the purpose of renting, maintaining, accessing and terminating a Safe Deposit Box at Purdue Federal.

BE IT RESOLVED THAT, the Partners certify the following information for each individual who directly or indirectly, through any contract, arrangement, understanding, relationship, or otherwise, owns 25 percent or more of the equity interests of the Partnership listed above. (If Partnership has Partners that are other business entities, you must drill down to individual ownership level. If no individual owns 25 percent or more, please indicate information for individual with largest ownership percentage only.)

NAME	BIRTH DATE	ADDRESS	FOR U.S. PERSONS	FOR FOREIGN PERSONS
			Social Security #	Passport # and Country of Issuance or Other Similar Foreign Country Issued Identification Document

BE IT RESOLVED THAT, the Partners certify the following information for one individual with significant responsibility for managing the Partnership (can be the same as a person listed above for ownership, or can be an executive officer or senior manager).

NAME	BIRTH DATE	ADDRESS	FOR U.S. PERSONS	FOR FOREIGN PERSONS
			Social Security #	Passport # and Country of Issuance or Other Similar Foreign Country Issued Identification Document

BE IT RESOLVED THAT, this resolution shall continue to have effect until express written notice of its rescission or modification has been received by Purdue Federal. Any revocation, modification or replacement of a resolution must be accompanied by documentation satisfactory to Purdue Federal, establishing the authority for the changes.

BE IT RESOLVED THAT, all transactions, if any, with respect to any deposits, withdrawals and borrowings by or on behalf of said Partnership with Purdue Federal prior to the adoption of this resolution are hereby ratified, approved and confirmed.

BE IT RESOLVED THAT, should the Partnership change entity form or ownership, the undersigned shall promptly notify Purdue Federal in writing.

All Partners must sign:

Signature: _____

Name: _____

Title: Partner

Dated: _____

Signature: _____

Name: _____

Title: Partner

Dated: _____

Signature: _____

Name: _____

Title: Partner

Dated: _____

Signature: _____

Name: _____

Title: Partner

Dated: _____

Signature: _____

Name: _____

Title: Partner

Dated: _____

Signature: _____

Name: _____

Title: Partner

Dated: _____