

NONPROFIT CORPORATE AUTHORIZATION RESOLUTION

	APPLIES TO:	ALL ACCOUNTS	SPECIFIED ACCOUNTS (See Addendum)
I certify	that I am the Secretary	of	(name corporation), a
Corpor	ation ("INC"), organized	under the laws of	(state), Tax Identification Number
	, enga	ged in business under the tra	de name of
(if diffe	rent from legal name), t	he INC maintains nonprofit s	status with the Internal Revenue Service, and that the
resolut	ions on this document a	re a true and correct copy of	the resolutions adopted at a meeting of the Board of
Directo	rs of the INC held on	(d	ate of meeting).
BE IT R	ESOLVED THAT, the Boa	rd of Directors of the INC ap	ooint,
		_, and	[Authorized Signer(s)] to exercise the powers listed
below:			
(2) (3) (4) (5) (6)	Federal Credit Union ("Endorse and deposit che payment of money, wire Enter into and execute initiated through an AT code, or similar means Enter into and execute systems permitted by I Enter into and execute transfer services provid If eligible per credit un other accounts held at Register the business to	Purdue Federal"); necks and orders for the payr thdraw or transfer funds in the any preauthorized electronic M, point-of-sale terminal, te and wire transfer agreements the NC. payment services agreement led by the credit union; on policies, enable this busing the credit union. or use online digital banking,	ing, share certificate or money market account at Purdue ment of money or otherwise, and to sign checks or orders for the INC's accounts at Purdue Federal; or transfer agreements for automatic withdrawals or transfers elephone, computer using an access device like a debit card, at authorize transfers by telephone or other communication its that allow for electronic bill payment and other electronic mess account to be connected via online digital banking to so long as such Authorized Signer is either the owner of the mager of the business (as set forth below).
	ESOLVED THAT, the Boa the authority to do the		ther appoint and

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(9) Enter into a lease for the purpose of renting, maintaining, accessing and terminating a Safe Deposit Box at

(8) Borrow money on behalf and in the name of the INC, sign, execute and deliver promissory notes or other

evidences of indebtedness, request credit cards; and

Purdue Federal.





BE IT RESOLVED THAT, the Board of Directors of the INC certify the following information for one individual with significant responsibility for managing the INC. (Can be the same as a signer listed above, 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 INC with Purdue Federal prior to the adoption of this resolution are hereby ratified, approved and confirmed.

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

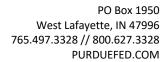
CERTIFICATION OF AUTHORITY

I further certify that the Board of Directors of INC has, and at the time of adoption of the above resolution had, full power and lawful authority to adopt the resolutions and confer the powers granted above to the person named who have full power and lawful authority to exercise the same. (Apply corporate seal if applicable.)

In witness whereof, I have subscribed my name to this document and affixed the seal of the INC where applicable.

Signature:				
Name:				
Title: Secretary				
Dated:				
ATTEST BY ONE OTHER OFFICER				
Signature:				
Name:				
Title:				
Dated:				

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ADDENDUM

The authority provided on this Resolution applies to the following accounts:

Account Number

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^{*}If more room is needed, complete second Addendum and attach.