



Account Number: _____

CORPORATION, AND/OR ASSOCIATION/ORGANIZATION AUTHORIZATION,
RESOLUTION, CERTIFICATION AND RELEASE OF LIABILITY

To Educational Systems Federal Credit Union:

I/We hereby individually and collectively certify to Educational Systems Federal Credit Union ("the Credit Union"), under penalties of perjury, as follows:

1. The name of our entity is: _____.
2. The entity is (please check) (A) _____ a Maryland chartered corporation; or (B) _____ an unincorporated association or organization.
3. I/We hereby certify to the Credit Union that the following is the taxpayer (EIN) ID or number reported to the internal revenue service for our entity: _____.
4. If the entity is a charitable 501(c)(3) organization, we hereby certify to the Credit Union that the entity's charitable identification number is: _____. Enter N/A if not a 501(c)(3).
5. If the entity is affiliated with a public school, public school system, or educators/employee organization, I/we certify to the Credit Union that our entity is affiliated with the following: (A) public school for the organization/entity; (B) Maryland county school system; or, (C) educators/employee organization: _____. Enter N/A if not affiliated with any of these organizations.
6. Attached to this document, which I/we hereby certify to the Credit Union as true and correct, are the following documents required by the Credit Union in order to manage and access the above-numbered account(s) at the Credit Union:
 - A. Copy of the Articles of Incorporation and bylaws, if incorporated;
 - B. Copy of any charter, management agreement, operating agreement, and rules and regulations, if any, of any unincorporated association or organization;
 - C. Copy of any tax exemption certificate issued by any school system, county, state or federal government.
 - D. Certified true copy of a banking resolution validly adopted by your corporation, association or organization designating the Credit Union as the depository financial institution for your entity, and naming the parties authorized to transact business with the Credit Union, and to handle the financial affairs of the entity with the Credit Union. The resolution is to be signed by the officer(s) and attended/witnessed by the entity's Secretary.
 - E. If your entity uses a tax identification number of a school system, a letter from the applicable Superintendent, Deputy Superintendent, or Chief Financial Officer of the school system certifying that the school system recognizes the existence of the entity/organization and authorizes your entity/organization to open and maintain this account with their tax identification number.

I/We hereby understand that the Credit Union has the right to require periodic certification that the information provided remains true and correct, and the Credit Union may require submission by the entity if any changes to the management of the entity and to the person(s) who have the authority to manage, on behalf of the entity, the financial affairs with the Credit Union and access the Credit Union accounts.

I/We understand that the Credit Union will rely on the entity's documentation with respect to those individuals who have access to the accounts at the Credit Union, and who are designated by the entity to manage the funds on deposit at the Credit Union and are the authorized signers on the account(s) at the Credit Union.



Account Number: _____

I/We, for ourselves and on behalf of our entity, hereby hold the Credit Union, its directors, officers, and employees, harmless, and save harmless and indemnify from any liability, monetary loss whatsoever, or financial damage, the Credit Union, its Board of Directors, its officers, employees, members and agents, from and against any and all future monetary claims, of any type or nature, resulting, directly or indirectly, from the Credit Union's good faith reliance on the documentation provided by the entity and its signers related to the accounts, and the funds therein deposited, at the Credit Union.

I/We understand that the Credit Union may require the execution of updated account signature cards as a prerequisite to the entity or its personnel being permitted to access any funds on deposit at the Credit Union.

I/We understand that this agreement shall also be binding upon the parties' respective successors, directors, officers, assigns, heirs, personal representative(s), trustees, and administrators.

In witness thereof, the undersigned has/have subscribed his/her name(s) to this document for themselves, individually and on behalf of the entity which he/she/they represent and affixed the seal of the entity on the _____ day of _____, 20__.

[Name of Entity] _____

By: _____

Name: _____

Title: _____

Director/Officer/Member/Trustee

By: _____

Name: _____

Title: _____

Director/Officer/Member/Trustee

By: _____

Name: _____

Title: _____

Director/Officer/Member/Trustee

By: _____

Name: _____

Title: _____

Director/Officer/Member/Trustee