



Business Services AUTHORIZATION DESIGNATION

BUSINESS INFORMATION

Name of Business/Organization/Association ("Entity")

Account Number

Location of Principal Office

State of Organization/Incorporation

Type of Business

Sole Proprietorship

Partnership

Incorporated Organization or Association

Corporation

Limited Liability Company

Unincorporated Organization or Association

RESOLUTION AND GRANT OF AUTHORITY TO ACT FOR THE BUSINESS / ORGANIZATION

The undersigned are duly authorized to execute this Resolution and Grant of Authority ("Resolution") on behalf of _____ ("Entity") named herein; and the undersigned hereby certify that Entity is duly organized and existing under the laws of the State of _____, United States.

The undersigned, under the penalty of perjury, hereby certify that the Entity is validly organized under applicable law and is in "good standing" under the laws of the state in which it is incorporated (if incorporated) and that at a meeting of the Board of Directors, Trustees, Members or Partners, or other governing body of this Entity at which a quorum was present (if applicable), the duly authorized and governing body of this Entity adopted the following resolution, which in all respects, is in conformity with the rules, agreements, bylaws, Operating Agreement or Articles of Incorporation/Organization of this Entity. It is intended that SAFE Federal Credit Union rely upon this Resolution.

SAFE Federal Credit Union may, in its sole discretion require new resolutions and/or signature card(s) be executed any time this Entity changes the authorized person(s)/signature(s); which changes must be submitted in a written document that is accepted by SAFE Federal Credit Union before any such change will be effective. If the authority contained in this Resolution should be revoked or terminated by operation of law or any other reason without actual notice to SAFE Federal Credit Union, such revocation shall not be effective upon it.

SAFE Federal Credit Union shall have the right to freeze access to all accounts and services if it believes there is any dispute as to the authority to act pursuant to this obligation; however, this right shall in no way obligate SAFE Federal Credit Union to exercise said right and its failure or refusal to exercise such rights shall in no way impute any duty, obligation or liability to SAFE Federal Credit Union hereunder or otherwise. SAFE Federal Credit Union shall be indemnified by the Entity; and shall be held harmless from any and all losses suffered or liabilities incurred by such revocation or termination. This Resolution shall be governed and interpreted under the laws of the State of South Carolina.

If multiple authorized users are listed, then any one of them acting alone is authorized to conduct any transaction or other business authorized by this Resolution. The Entity is solely responsible for any changes to the authorized persons; and SAFE Federal Credit Union shall have no liability whatsoever for any transaction undertaken by a person listed as an authorized user or signer herein.

THEREFORE BE IT RESOLVED THAT SAFE Federal Credit Union is designated a depository institution of this Entity and is authorized to recognize any one of the signature(s) of any person(s) designated below ("Authorized Person(s)" or "Authorized Signer(s)") for any of this Entity's accounts, in opening any additional accounts or related services, paying funds or transacting any business related to any such account(s) or services with SAFE Federal Credit Union (including but not limited to all financial services SAFE Federal Credit Union offers now or in the future, including safe deposit box leases) which authority will remain in full force and effect until SAFE Federal Credit Union receives a new Resolution in writing from this Entity. SAFE Federal Credit Union is likewise authorized to recognize any facsimile signature or endorsement of this Entity or any authorized person, whether authorized or unauthorized. This authority includes the authority to open any new accounts or services, and to enter into any changes, modifications or accommodations.

BE IT FURTHER RESOLVED THAT the Authorized Person(s) may authorize the use and access of accounts and services, and the issuance of any access device the Entity may obtain from the Credit Union for access and use of any accounts and/or services SAFE Federal Credit Union offers now or in the future, to the employees, agents or any other persons the Authorized Person(s) appoint or designate from time to time; and such authorization shall be deemed as authorized herein.

BE IT FURTHER RESOLVED THAT this Entity agrees that all accounts will be governed by the terms and conditions set forth in the Business Services Membership Application and Signature Card, Business Services Membership and Account Agreement, Business Services Rate Schedule, Business Services Fee Schedule and any other agreement, disclosure, term or condition required to open or maintain any account(s) and all bylaws, policies, procedures, statutes and regulations governing SAFE Federal Credit Union or any account.

EXPRESS AUTHORIZATION FOR CASHING CHECKS

By checking this box, we direct SAFE Federal Credit Union and agree It is the policy of SAFE Federal Credit Union to only allow items presented for negotiation on any business, association or organization account to be deposited only into the account of the business, association or organization; and not allow items to be presented for cash or deposit to any non-business, non-association or non-organization account(s). If you wish to expressly grant the power to cash items (in whole or part) to all the Authorized Person(s) listed below you must complete this section; and you release SAFE Federal Credit Union from all claims associated with any misappropriation of funds or other wrongdoing by the parties designated.

VOTING AGENT

Pursuant to the Credit Union's Bylaws – each member may cast one vote. To wit, the entity designates the following individual as its voting agent. If no agent is designated the first named Authorized Party shall be the voting agent.

Voting Agent Name

ADOPTION OF RESOLUTION

Date of the meeting at which this Resolution was adopted

AUTHORIZED PERSON(S) TO ACT FOR THE BUSINESS OR ORGANIZATION

The following persons will be authorized to undertake all actions set forth in the Resolution above. No other persons will have authority unless this Resolution is properly replaced and new contracts and/or Signature Cards are executed as SAFE Federal Credit Union may require.

_____	_____	_____
<i>Authorized Person Full Name</i>	<i>Title</i>	<i>SSN</i>
_____	_____	_____
<i>Authorized Person Full Name</i>	<i>Title</i>	<i>SSN</i>
_____	_____	_____
<i>Authorized Person Full Name</i>	<i>Title</i>	<i>SSN</i>

COMPLETE THE SECTION APPLICABLE TO THE FORM OF ENTITY NOTED ON PAGE 1

SOLE PROPRIETORS GRANT OF AUTHORITY TO OTHERS

I hereby authorize the "Authorized Person" Named herein to exercise all powers and actions set forth in the Resolutions above. Further, I hereby release the Credit Union and all officers, directors and employees of the Credit Union from any and all claims, demands, damages, actions, causes of actions, suits at law, or suits in equity, of whatsoever kind or nature, past, present or future, known or unknown, incurred or to be incurred, with regard to any action the Credit Union undertakes in reliance on this authorization.

_____	_____
<i>Full Name of Authorized Person</i>	<i>SSN of Authorized Person</i>
_____	_____
<i>Sole Proprietor Signature</i>	<i>Date</i>

CORPORATION OR LIMITED LIABILITY COMPANY

In witness whereof, the Secretary of the Corporation (or all Members if Member directed) named herein has hereunto set his/her hand as secretary and affixed the corporate seal, on the date above stated.

Secretary (or Member) Signature

PARTNERSHIP

The partners certify that all partners have signed below and further certify that this partnership is not a limited partnership, and execute this Agreement under seal, on the date above stated.

Partner Signature

Partner Signature

INCORPORATED OR UNINCORPORATED ORGANIZATION OR ASSOCIATION

The undersigned officers of the organization or association listed herein authorize the Authorized Person(s) named herein to exercise all powers and actions set forth in the Resolutions above and further certify under the penalty of perjury that they have undertaken an investigation of the organization's or association's members; and that all members of said organization are eligible for membership pursuant to SAFE Federal Credit Union's bylaws.

_____	_____	_____
<i>Officer Signature</i>	<i>Title or Office</i>	<i>Date</i>
_____	_____	_____
<i>Officer Signature</i>	<i>Title or Office</i>	<i>Date</i>
_____	_____	_____
<i>Officer Signature</i>	<i>Title or Office</i>	<i>Date</i>
_____	_____	_____
<i>Officer Signature</i>	<i>Title or Office</i>	<i>Date</i>