

Sole Proprietorship/DBA Resolution of Authority

_____, certify that I am the sole owner ("Owner") of the business operating under the name

("Business"), Federal Tax ID Number _____

I further certify that the Business is a sole proprietorship or DBA and that there is no one else having any right, title, or interest therein. I am the only person authorized to act in the name of or on behalf of the Business except as provided in the Account Authority section of this Resolution.

I have no knowledge of any other business that is using, or being operated under, a name which could be considered confusingly similar to the name of this sole proprietorship. All deposits which are to be made into the account of the sole proprietorship will consist of funds to which I, the sole proprietor, am legally entitled.

Be it resolved that:

- 1. ESL Federal Credit Union (ESL) is designated as the financial institution of the Business.
- This Resolution shall continue to have effect until express written notice of its rescission or modification has been received and acknowledged by ESL. Any and all Resolutions adopted by the Business and certified to ESL as governing the operation of this Business's account(s) are in full force and effect unless supplemented, modified or rescinded by this Resolution.
- 3. The Business shall use its accounts for business and/or commercial purposes only.
- 4. Any and all transactions by or on behalf of this Business with ESL prior to the adoption of this Resolution are hereby ratified, approved and confirmed.
- 5. The Business shall not use its accounts for unlawful Internet gambling (defined as, with limited exceptions, placing, receiving, or otherwise knowingly transmitting a bet or wager by any means which involves the use, at least in part, of the Internet where such bet or wager is unlawful under any applicable Federal or State law in the State or Tribal lands in which the bet or wager is initiated, received, or otherwise made).
- 6. ESL is authorized to honor and charge to the Business's account any and all checks, drafts, or other orders for the payment of money that are drawn on ESL, and signed by me. I expressly assume all risks involved in the use of any electronic or mechanical form of signature and relieve ESL from any and all liability and responsibility, whether or not use of the signature was authorized.
- 7. ESL is hereby directed to accept and pay, without further inquiry, any item drawn against any Business account with ESL that bears my signature. ESL shall not be required or be under any obligation to inquire as to the circumstance of the issue or use of any item signed in accordance with the Resolutions contained herein, or the application or disposition of such item or the proceeds of the item.
- 8. I may enter into one or more agreements with ESL to provide electronic or remote access, by means of the Internet, software, hardware, equipment, telephone or any other means, to the Business's account(s) with ESL. I expressly assume all risks involved in the use of this form of transaction and relieve ESL from any and all liability and responsibility, whether or not use of the electronic or remote access was authorized.

Account Authority:

Account transactions: Endorse Checks, wires, withdraw funds			
Name:	SSN:		
ID Type:	Description:	_ Exp. Date:	
Signature:	Date:	_	

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Name:	SSN:		
ID Type:			
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Account Authority: Account transactions: Endorse Checks, wires, withdraw funds			
Name:	SSN:		
ID Type:	Description:	_ Exp. Date:	
Signature:	Date:	-	
Account Authority:			
Name:	SSN:		
ID Type:	Description:	_ Exp. Date:	
Signature:	Date:	_	
*In addition to signing this Resolution, in order for any person named above to have account authority on specific accounts, both the Owner and any person named above must sign a Business Member Account Agreement for the specific account(s). Both the Owner and each person named above agree to adhere to the Resolutions outlined in this Resolution.			
Certification of Authority: In Witness Whereof, I have hereunto subscribed my name on behalf of this Business on			
Print Name of Owner:	Signature of Owner:		
Subscribed as sworn before the undersigned Notary Public this	day of, 20		
Signed: _	Notary Public		
My Commission Expires:			
Business Member Number:			
Membership Officer:	Branch:		