



Business Account Signature Card

Account Number: _____ Date: _____

Member hereby applies for account(s) in 1st Advantage Federal Credit Union and for issuance of evidence of the same:

Member Name: _____ EIN/TIN: _____

Account Title (Name): _____

Business Street Address: _____

Mailing Address (if different): _____

Telephone Number (s): _____

Form of Organization:

- Sole Proprietorship Partnership LLC
- S-Corporation C-Corporation Unincorporated Association
- Non-Profit Corporation LLP Other (explain): _____

Specimens of the signatures of those that are authorized to make withdrawals from the account(s) and to act in connection therewith are indicated below, and the Credit Union is authorized to act upon the request of Member bearing any of such signatures, including, but without limiting the generality of the foregoing, the pledging of the account(s) in whole or in part as security for any loan made by the Credit Union to Member, until Member receives written notice of the authorization of others to sign for Member together with specimen signatures of such person (s). The Credit Union is authorized to supply any endorsement for Member on any check or other instrument tendered for the account(s) and the Credit Union is hereby relieved of any liability in connection with collection of such items which are handled by you without negligence, and the Credit Union shall not be liable for the acts of its agents, subagents or others for any casualty. Withdrawals may not be made on account (s) of such items until collected, and any amount not collected may be charged back to the account(s), including expenses incurred, and any other outside expenses incurred relative to the account(s) may be charged to Member.

Certification - Under penalties of perjury, I, as authorized agent of the Depositor certify that:

- 1) this is the correct taxpayer identification number for the Depositor (or the Depositor is waiting for a number to be issued), **and**
- 2) the Depositor is not subject to backup withholding because: (a) the Depositor is exempt from backup withholding, or (b) the Depositor has not been notified by the Internal Revenue Service (IRS) that it is subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified the Depositor that it is no longer subject to backup withholding, **and**
- 3) the depositor is a U.S. person (including a U.S. resident alien).

Certification Instructions. You must cross out item 2 above if, the Depositor has been notified by the IRS that the Depositor is currently subject to backup withholding because the Depositor has failed to report all interest and dividends on the Depositor's tax return.

Authorized Signature: _____ **Printed Name & Title** _____

Authorized Signature: _____ **Printed Name & Title** _____

Authorized Signature: _____ **Printed Name & Title** _____

Authorized Signature: _____ **Printed Name & Title** _____

Internal Use Only:

Teller # _____ Initials _____ Branch # _____ Date Received _____

- ID Copy of All Authorized Signers Copy of Business License OFAC Score
- Employee ID/Initials Virginia Business Verification Service