

## Delegation of Banking Authority by Governing Person

Please return completed and signed form to a BECU location. If you have any questions, contact BECU at 800-233-2328.

1. Business Information				
BUSINESS NAME (as it appears on the Business Membership Application) FEDERAL TAX ID NUMBER (EIN OR SSN) ☐ EIN ☐ SSN				
STREET ADDRESS			CITY	
STATE / PROVINCE	ZIP / POSTAL CODE		COUNTRY	
on the transfer of the transfe	ZII / I GOTAL GODL		CONTIN	
2. Delegate Information				
NAME	TI	TLE		
3. Agreement and Signature				
The undersigned, a duly authorized representative of the business listed in section 1, an active business (the				
"Business"), authorizes the individual listed in section 2 to act on my behalf and on behalf of the Business to take all				
actions and enter into binding agreements on behalf of the Business to:				
<ul> <li>Apply for a business membership in the Boeing Employees' Credit Union (BECU);</li> </ul>				
Open checking, savings, or share accounts at BECU;				
<ul> <li>Designate individuals to act as Authorized Signers and/or have access to funds in or information about such accounts, and</li> </ul>				
Apply for business credit on behalf of the Business.				
I attest that I (the undersigned) am currently authorized by the Business to act on behalf of the Business and bind the				
Business to the types of banking arrangements stated above. I also warrant and represent that I am empowered by the				
Business to delegate this authority to the individual identified above, who may therefore act on my behalf.				
NAME SIGNATURE			· · · · · · · · · · · · · · · · · · ·	
TITLE				DATE
Contact Information  CONTACT NUMBER □ Home □ Mobile □ Work EMAIL ADDRESS				
CONTACT NUMBER	□ Work   EMAIL ADD	KESS		

Submit this form in person at any BECU location. To find a BECU location, visit <u>becu.org</u>.