

WATERFIELD BANK SOLE PROPRIETOR RESOLUTION

Account Number: _____ Social Security Number: _____ Date: _____

The undersigned desire to establish with Waterfield Bank a deposit and checking deposit account to be known as:

Name of Organization

And certify that the said name which I/we are using in the conduct of an unincorporated business owned entirely by the undersigned. I/we have agreed that checks and orders for the payment of money withdrawing funds from said account may be signed by the following individual(s):

Please indicate the name(s) of those authorized to sign & state whether checks will bear one signature or will be signed and countersigned.

Checks, drafts, notes, bills of exchange and orders for payment of money may be endorsed by any of the undersigned, and deposited with you for the credit of said account. Such endorsements may be made in writing or by a stamp and without designation of the person so endorsing.

The undersigned authorize and request you to pay and charge to said account checks, obligations and orders for the payment of money drawn on or payable at, or which shall be paid or honored by your bank when so signed, whether payable to the order of any of said signers or not; and also authorize and request you to receive deposits and conduct the said account in accordance with the instructions stated above, stated on the authorized signature card filed with you by the undersigned.

If any other persons become interested in said business as co-partners of the undersigned or our relations as such be altered in any way or if the business should become incorporated, the undersigned will notify you promptly.

Authorized Signature

Date

Authorized Signature (any additional resolution signer MUST be the sole proprietor's legal spouse)

Date

All deposit products offered by the Banking Center are provided by Waterfield Bank.

