

# OFFICIAL AUTHORIZATION LIST

Routing (ABA) No. \_\_\_\_\_

Page \_\_\_\_\_ of \_\_\_\_\_

This supercedes our previous  
Official Authorization List:

(Circle:) **YES** or **NO**

If neither is circled, previous list will also remain in effect.

Name of Institution:	Date:
Street Address:	Telephone:

**To the Federal Reserve Banks:** Below are the names, titles, and signatures of the individuals authorized to transact business and issue instructions (except for Discount Window (Operating Circular 10) transactions) on behalf of the Institution identified above.

<u>Name and Title (printed):</u>	<u>Telephone No. and E-Mail Address:</u>	<u>Signature:</u>	<u>Limitations to Authority:</u> (leave blank if no limitations)

**Authorizing Officer (must be identified by name or title in Paragraph 2 of your Institution's authorizing Resolutions):**

Signature: _____  _____ (Printed Name and Title)  _____ (Telephone)  _____ (E-Mail Address)	State of _____ ) County of _____ )  Subscribed and sworn to before me on _____, 20 _____, by _____.  _____ <b>Notary Public</b>  (Notary Seal)
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**Secretary's Certification (must be completed if Par. 2 of your Institution's authorizing Resolutions identify Authorized Officers by title only):**

I, _____, Secretary (or Assistant Secretary) of the above Institution do hereby certify that _____ is a (Authorizing Officer's Name) _____ of such Institution. (Title of Authorizing Officer)  Signature: _____  _____ (Printed Name and Title)	State of _____ ) County of _____ )  Subscribed and sworn to before me on _____, 20 _____, by _____.  _____ <b>Notary Public</b>  (Notary Seal)
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