

Note: Please enable Macros

CLIENT INFORMATION

Please select one of the following options:

- New Resolution/Incumbency
- Update Incumbency *(Used to Add or Delete individual authorized signers)*
- Supersede Resolution/Incumbency *(Replaces any and all prior banking resolutions)*

ORGANIZATION LEGAL NAME (Must match legal name indicated in company formation documents)

Children's Trust of Alachua County

- **This Banking Resolution and Certificate of Incumbency will apply to all accounts the Organization maintains with us.**
- **The Organization adopts the following Banking Resolution and Certificate of Incumbency (with specimen signatures)***

The undersigned certifies that:

1) Any individual (each an "Authorized Signer") with any of the following Titles

Title:	CHAIR
Title:	TREASURER
Title:	EXECUTIVE DIRECTOR

Add Row

is authorized, acting alone, including by electronic signature, electronic record or other electronic form, (a) to establish accounts from time to time for the Organization at Bank of America, N.A. (the "Bank"), as well as to operate and close such accounts, (b) to enter into any and all agreements and transactions contemplated by the provision of treasury management services by the Bank, including but not limited to Electronic Funds Transfer Services, and (c) designate persons to operate each such accounts including closing the account, and to designate persons to act in the name and on behalf of the Organization/Client with respect to the establishment and operation of treasury management services.

2) the person whose signature, name, and title appear in the "AGREEMENT, TAX INFORMATION CERTIFICATION and AUTHORIZATION" section of the Deposit Account Documentation Signature Card or Amendment to Signature Card ("Signature Card") and those persons listed below on the Incumbency Certificate, are Authorized Signers who are authorized, including by electronic signature, electronic record or other electronic form, to establish accounts and to designate persons to operate each such account and to execute contracts and agreements (including treasury management service agreements, including but not limited to Electronic Funds Transfer Agreements) with the Bank and that the signatures of such Authorized Signers are genuine.

3) the persons who signed in the Designated Account Signers section of the Signature Card or Amendment to Signature Card are authorized to operate any accounts opened with the deposit account documentation unless otherwise noted on the Signature Card, and that the signatures of such Designated Account Signers are genuine.

4) the foregoing is a complete, true and correct copy of the banking resolutions adopted by the Board of Directors, the Members or the General Partners, Commission, Council or Governing Board as applicable, of the Organization, government entity or authority and that the resolutions are still in full force and effect and have not been amended or revoked and do not exceed the objects or powers of the Organization, government entity, authority or the powers of its management or Governing Board, Commission or Council. **For government entities, agencies or authorities, each of the individuals noted below are an officer, employee, or agent of the Organization who has plenary authority over funds (an "official custodian") for which the official custodian is appointed or elected to serve. The authority of the official custodian(s) listed below derives from an official source, such as an ordinance or statute.**

Incumbency Certificate:

Add/Delete	Name	Title	Signature
Select One	DR. MARGARITA LABARTA	CHAIR	
Select One	LEE PINKOSON	TREASURER	
Select One	COLIN G. MURPHY	EXECUTIVE DIRECTOR	

Add Row

*** If you choose to provide your own Banking Resolution and Certificate of Incumbency (with specimen signatures), it must be attached to the signature card.**

This Banking Resolution and Certificate of Incumbency must be signed as follows:

- **Corporations:** Secretary or assistant secretary of the company **must** sign.
- **Any Partnership type:** One of the general partners must sign. If the general partner is an organization, show the name of the general partner and include capacity of signer.
- **Limited Liability Company:**
 - **Member Managed LLC:** One of the members or an officer of the company must sign. If the member or manager is an organization, show the name of the member or manager and include capacity of signer.

<ul style="list-style-type: none"> ▪ Manager Managed LLC: The manager or managers or an officer authorized of the company must sign. If the member or manager is an organization, show the name of the member or manager and include capacity of signer. • Other unincorporated organizations: An officer of the organization who is authorized by the by-laws or operating agreement of the company must sign. • Government entities, authorities or agencies: An authorized signer of the government entity/authority who is authorized by the statutes must sign. 			
In Witness Whereof, I have hereunto set my hand as (title) of the Organization listed above			
Title: CHAIR			
Type or Print Name of Certifying Individual			
DR. MARGARITA LABARTA			
Name of Company who is General Partner or Member, leave blank if not applicable. (Type or print Name of company including the legal name of any member, managing member, manager, or general partner who is signing and who is not an individual)			
Signature:		Date:	JANUARY 10,2022