



INCORPORATED ORGANIZATION FORM (US)

I, _____ on this _____ day of _____, 20____, the duly qualified and acting

Secretary/Clerk of _____
(Name of Organization & Address)

do hereby certify that the following is a complete, true and correct copy of certain resolutions adopted at a duly called meeting held on the _____ day of _____, 20____ and that said resolutions have not been rescinded or modified;

BE IT RESOLVED that CHURCH INVESTORS FUND, INC. (CeIF), Elk Grove, California, be and it is hereby designated a depository in which the funds of this Organization be deposited by its officers, agents, and employees, and each of them is hereby authorized to endorse for deposit or negotiation any and all checks, drafts, notes, bills of exchange, and orders for the payment of money, either belonging to or coming into the possession of this Organization. Endorsements for deposit may be by the written or stamped endorsement of the Organization without designation of the person making the endorsement.

BE IT FURTHER RESOLVED, that at least _____ (example: 2) of the persons listed below are authorized and must sign any and all drafts, receipts, and orders, including orders or directions in informal or letter form, against any funds at any time standing to the credit of this organization the said CeIF, or against any account of this Organization with the said CeIF, and the said CeIF is hereby authorized to honor any and all checks, drafts, receipts, and orders so signed, including those drawn to an individual order of any such officer or other person signing the same, without further inquiry or regard to the authority of said officer(s) or other person(s) or the use of said checks, drafts, receipts and orders or the proceeds thereof.

BE IT FURTHER RESOLVED, that this Organization hereby agrees to protect and indemnify said CeIF against all loss or liability, including court costs and attorneys' fees, arising from or growing out of the acceptance by it for payment or credit of checks or other items drawn to the order of and endorsed in the name of this Organization or any trade name used by this Organization.

NAME	TITLE	SPECIMEN SIGNATURE

(Titles of officers or other persons authorized to sign checks or withdrawals; e.g.; President, Treasurer, etc.)

OPTIONAL:

I FURTHER CERTIFY that _____ is authorized to receive correspondence at	
_____	_____ regarding CeIF accounts.
Address	E-mail

_____ Secretary Signature _____ Date

_____ President/Pastor Signature _____ Date