

SOUTHERN VIRGINIA DIOCESAN FOUNDATION

INVESTMENT AUTHORIZATION FORM

Church or Entity _____

Address _____

City _____, Virginia _____

Contact person _____ Phone # _____ Email _____

The undersigned certifies to the Southern Virginia Diocesan Foundation (the "Foundation") that the church or entity has duly authorized by appropriate resolution or other action the investment of funds with the Foundation and that each of the following individuals has been authorized to initiate any and all transaction requests, including but not limited to deposits, withdrawals, and account closings, in the name of the church or entity relating to funds on deposit with the Foundation. The names of the individuals so authorized are:

PRINT NAME _____ SIGNATURE _____ DATE _____

PRINT NAME _____ SIGNATURE _____ DATE _____

PRINT NAME _____ SIGNATURE _____ DATE _____

PRINT NAME _____ SIGNATURE _____ DATE _____

If more than one signature is required for all transactions or for transactions over a stated dollar amount, please state the number of signatures required and/ or the dollar amount.

of signatures required _____ FOR ALL TRANSACTIONS
 FOR WITHDRAWALS ONLY
 FOR TRANSACTIONS ABOVE (DOLLAR AMOUNT) \$ _____

The undersigned certifies that (1) the entity has been validly formed and currently exists in good standing in accordance with applicable law; (2) the undersigned is permitted to execute this authorization on behalf of the entity; (3) this authorization shall be binding upon the entity and all of the owners/ members/ trustees/ directors/ managers thereof notwithstanding anything to the contrary in the entity's governing documents; (4) the authority of the designated individuals to perform each and all of the powers described above shall remain in full force and effect and the Foundation shall be fully entitled to rely on such signatures until written revocation of such authority is delivered to, and received by, the Foundation; and (5) all of the original signatures contained in this authorization are genuine in all respects. The undersigned agrees to notify promptly the Foundation in writing of any change in form or legal status of the entity.

PRINT NAME _____ EXECUTED ON (DATE) _____

SIGNATURE _____ TITLE _____

Mail or Email form to:
Southern Virginia Diocesan Foundation
c/o Episcopal Diocese of Southern Virginia
11832 Rock Landing Drive, Suite 100
Newport News, VA 23606-4231
(757) 213-3386
jdobson@diosova.org