

Step 1- Business Account Types & Required Documentation

Sole Proprietorship

The most common form of organization for a small business is the sole proprietorship. In a sole proprietorship, the business is owned and controlled by one individual. This person alone receives the profits and is responsible for the obligations of the business. If a husband and wife wish to own a business together, they must form a partnership, corporation or limited liability company. Any person that is conducting business or accepting checks under a name other than their own full legal name would be included in this category. If the name of the business does not include the owners first and last full legal name in the title, a Fictitious Name Registration is required.

Summary of Requirements

Primary N	Membershij	p Account					
0	Business	Account	Resolution	Form	(CU	provided	with
	Members	hip app)				•	
Business	Гах Id <i>О</i> R .	SSN					

Copy of filed fictitious name registration with the state
Valid Driver's License and Social Security Card for all signers/owners
12 Months of bank statements for existing business account.

Partnership

A partnership is made up of two or more people. There are two common forms of partnerships-general and limited.

General Partnership (GP)—all partners share equally in the right, and responsibility, to manage the business, and each partner is responsible for all the debts and obligations of the business. A general partnership legally ends when a partner withdraws or dies.

Limited Partnership (LP)—a limited partnership is a type of partnership in which the limited partners share in the partnership's liability up to the amount of their investment in the limited partnership. By statute, the limited partnership must have at least one general partner and one limited partner. Limited partners may sell their ownership in the company, the partnership does not end if a limited partner sells ownership or dies.

Summary of Requirements

Primary Membership Account of at least one owner					
O Business Account Resolution Form (CU provided with					
Membership app)					
Business Tax ID					
Copy of filed fictitious name registration with the state					
Partnership Agreement or Limited Partnership Agreement					
Certificate of Limited Partnership with file number stamped and dated					
from the State of Missouri					
Valid Driver's License and Social Security Card for all signers/owners					
12 Months of bank statements for existing business account.					

Unincorporated Association, Non-profit Accounts

This group is defined as non-profit organizations, and may include churches, PTAs, homeowners and condominium owners.

Summary of Requirements

ó	Business	Account	Resolution	Form	(CU	provided	with
	Members	hip app)					
Business T	ax Id						

Primary Membership Account of at least one owner

Valid Driver's License and Social Security Card for *all* signers/owners

Limited Liability Company

Limited Liability Companies (LLC) are designed to combine the tax treatment of a partnership with the limited liability characteristics of a corporation. The investors in an LLC are known as members (not stockholders) and it has a board of governors who are given the authority to establish and handle the account at the credit union. A limited liability company may have one or more members. When the company is first established, the members must file Articles of Organization and an Operating Agreement.

Sun	nmary of Requirements						
	Primary Membership Account of at least one owner						
	o Business Account Resolution Form (CU provided with						
	Membership app)						
	Business Tax ID						
	Copy of filed fictitious name registration with the state						
	Operating Agreement signed by <i>all</i> owners						
	Article of Organization with file number stamped and dated from the						
	State of Missouri						
	Valid Driver's License and Social Security Card for all signers/owners						
12 Months of bank statements for existing business account.							
Co	<u>Corporation</u>						
Ас	A corporation is a legal entity separate from its owners, it is owned by one or						
mor	e shareholders. The shareholders elect a board of directors which ha						
resp	consibility for management and control of the corporation. Any busines						
, 1							

A corporation is a legal entity separate from its owners, it is owned by one or more shareholders. The shareholders elect a board of directors which has responsibility for management and control of the corporation. Any business that files their Articles of Incorporation with the state is considered under this group. A Certificate of Assumed Name is required on corporate accounts if the business also conducts business using a name that is different from the true name of the corporation as stated on the Articles of Incorporation. Example: If Johnson Building Company does business as Johnson Construction it must register a Certificate of Assumed Name. However, if Johnson Building Company also does business as Johnson Building, a Certificate of Assumed Name is not required.

Summary of Requirements

Filliary Membership Account of at least one owner
o Business Account Resolution Form (CU provided with
Membership app)
Business Tax ID
Copy of filed fictitious name registration with the state
Articles of Incorporation signed by all owners file number stamped and dated from the State of Missouri
Valid Driver's License and Social Security Card for all signers/owners
12 Months of bank statements for existing business account.

Recreational Clubs or Account

This group is defined as informal associations or clubs. High school class reunion accounts, bowling leagues, etc.

Summary of Requirements

	Primary Membership Account of at least owner
	Business Tax Id
	o Business Account Resolution Form (CU provided wi
	Membership app)
	Valid Driver's License and Social Security Card for all signers/own
Sec	retary of State
http	o://www.sos.mo.gov/business/corporations/onlineServices.asp

Step 2- Bu	isiness Acc	count Information – To	ell Us Abo	ut Your Business			
1.	What is the	Primary purpose of your busines	ss?				
2.	How long ha	ive you been in business?		_			
3.		average number of checks you e	xpect to depos	it a			
4.	How much v	will the Average Monthly Balanc	e in the accour	it			
5.	Do you curr	ently have a business account wi	th another				
	financial inst	itution? Y or N					
	If yes,	with who?		_			
	What i	s the reason for leaving them?					
6.	Do you fore	see ever doing wire transfers eit	ther in or out o	of			
	the account?	-					
Step 3- SS	N or Tax I	D					
Social Securi	ity Number or	Federal Tax ID #:					
□ Т	he taxnaver id	entification number (TIN) show	n above is my	correct taxpaver identification	number for this busines	s/organization	
		PIENT I am an exempt recipien	-			or organization.	
		HHOLDING I am not subject to e to report all interest or divide					
Signature						Date	
Step 4- Pro	ducts and	Services					
□ Se	avings Only						
	Checking & Sav	ings					
\square N	Modification to	Existing Business Account					
	Other			_			
Step 5- Bu	siness Acc	count Information					
Account Ti	itle				Tax Id#		
Mailing Ac	ldress of					How long has	
Business						business existed?	
Physical Ac Business	ddress of					How long at this address?	
Business P	hone		Fax#		Website		



Step 6- Owners/Authorized Signers OWNER/AUTHORIZED SIGNER #1 Primary Name Membership # Physical Yrs at Address Residence Work Phone **Cell Phone** Home Phone **Mother Maiden** Social Date of Birth Security # **DL State** DL Number E-Mail Address **Employer How Long** Have you lived in MO for the past 5 Others Yes No years? If no, list other states of residence: OWNER/AUTHORIZED SIGNER #2 Name **Primary** Membership # **Physical** Yrs at Address Residence Home **Work Phone** Cell Phone Phone Social Date of Birth **Mother Maiden** Security # **DL State** DL Number E-Mail Address **Employer How Long** Have you lived in MO for the past 5 Yes No Others years? If no, list other states of residence: OWNER/AUTHORIZED SIGNER #3 Primary Name Membership # Physical Yrs at Address Residence Work Phone Cell Phone Home Phone Date of Birth Mother Maiden Social Security # DL State DL Number E-Mail Address **Employer** How Long Have you lived in MO for the past 5 Yes No Others years? If no, list other states of residence: OWNER/AUTHORIZED SIGNER #4 Primary Name Membership # Physical Yrs at Address Residence Home **Work Phone** Cell Phone Phone Date of Birth Mother Maiden Social Security # DL Number E-Mail Address **DL State Employer How Long** Have you lived in MO for the past 5 Yes No Others years? If no, list other states of residence:

Step 7- Authorization/Signatures

Everything I/we have stated in this application is true to the best of my/our knowledge. I/We understand that Columbia Credit Union will retain this application whether or not it is approved. Columbia Credit Union is authorized to verify my/our employment, check my/our credit history and to answer questions about credit experience with me/us. By making this application, I/we agree to (1) the terms and conditions governing all Columbia Credit Union accounts; (2) the terms and conditions of any agreements for specific services such as checking, savings, certificates and electronic banking; and (3) the terms of Columbia Credit Union's fee and information schedule as amended from time to time. I/we also agree to all terms, whether posted in your premises, printed on deposit slips, contained in your fee and information schedule or enclosed with statements. I/We understand that any of the terms may be changed by Columbia Credit Union from time to time.

My/our signature(s) below signifies that I/we have read the Account Agreement and Disclosures and agree to abide by its terms and conditions.
Authorized Signer #1
Authorized Signer #2
Authorized Signer #3
Authorized Signer #4



Step 8- Account Resolution

I/We cei	rtify to Columbia Cr	edit Union (the "Credit Un	tion") that the following Bu	siness Resolutions	(the "Resolutions")	were adopted with	all necessary app	rovals by
the:	Board of Director	rs Sole Proprietor	General Partner(s)	Trustee(s)	Unincorporated	Association or Or	ganization	
Other		of				(the "Busine	ess") with a	Taxpayer
Id of _		is	a /an Unincorporated	Association or Or	ganization LLC	Corporation	Partnership	
Limited l	Partnership S	Sole Proprietorship	Other (specify):		Organize	d under the laws	of	
			(state).					

I/We further certify that the following is a true and correct copy of such Resolutions and that such Resolutions continue in full force and effect without amendment or alteration on the date hereof and are in all respects in conformity with and authorized by any articles of organization, certificate of incorporation, charter, by-laws, declaration of trust, partnership agreement, operating agreement or other governing instrument(s) in force at the time of adoption of said Resolutions and at the present time and that the Business shall notify the Credit Union in writing immediately of any changes.

DEPOSIT ACCOUNTS

RESOLVED: That for purposes of establishing one or more business deposit accounts with the Credit Union and utilizing the products and services offered by the Credit Union in connection therewith, the Business shall submit an application or request therefore in a form provided by the Credit Union and in so doing shall agree to be bound by the provisions thereof and by (i) the Credit Union's rules and regulations applicable to such Business Accounts; (ii) the Credit Union's Electronic Funds Transfer and Funds Availability Disclosures; (iii) the Credit Union's terms and conditions and/or rules and regulations for any business services selected by the Business from time to time; and (iv) the Credit Union's Business deposit account fee schedule, as each of them may be amended by the Credit Union from time to time, and that in order to accomplish the foregoing, the individual whose name and title appears below as the primary Authorized Representative be, and hereby is, authorized on behalf of the Business, acting singly, to execute the application or request and all other documents required by the Credit Union to be executed by the Business in connection therewith, including without limitation a Request for Taxpayer Identification Number and Certification (IRS Form W-9 or substitute Form W-9).

RESOLVED: That the Credit Union be, and hereby is, designated a depository of funds of the Business with the authority to accept at anytime for the credit of the Business deposits in checking, savings, money market, or any other accounts, by whomsoever made in whatever manner endorsed; and, without limiting and generality of the foregoing, which endorsement may be in writing, by stamp, or otherwise and which endorsement may be effectively made with or without designation or signature of the person so endorsing; and all funds in the Business' accounts shall be subject to the bylaws, rules, account agreements, regulations and conditions of the Credit Union governing deposits now in effect or hereafter adopted by the Credit Union and the Credit Union shall not be liable in connection with the collection of such items which are handled by the Credit Union without negligence and the Credit Union shall not be liable for the acts of its agents, subagents or for any casualty.

RESOLVED: That the Credit Union be, and hereby is, authorized and directed to pay or otherwise honor checks, drafts, notes, bills of exchange, acceptances, undertakings and other instruments or orders for the payment, transfer or withdrawal of money for whatever purpose and to whomsoever payable when made, signed, accepted or endorsed by the signature, actual or purported facsimile signature, or oral direction of any one (1) of the persons designated below as an Authorized Representative.

RESOLVED: That the Business assumes full responsibility for (A) the use of actual or purported facsimile signature(s) of any individual identified below as an Authorized Representative on checks, drafts or orders of the Business drawn on the Credit Union, and for payments made by the Credit Union in reliance thereon, which payments may be charged to the account of the Business regardless of by whom or by what means the actual or purported facsimile signature(s) may have been affixed or impressed; (B) the oral direction of any individual identifying himself or herself to be an individual identified below as an Authorized Representative, the Credit Union not having any obligation to verify the identity of any such individual, provided the Credit Union in good faith; and (C) the possession and/or use of any Business Debit Card(s) issued by the Credit Union, whether or not any such Card was, in fact, used by a duly authorized representative of the Business, unless and until the Credit Union has received written notice that the Card issued to the Business has been lost or stolen and the Credit Union has a reasonable period of time to act on such notice.

WIRE TRANSFER AUTHORIZATION

RESOLVED: That any one or more of the individuals identified below as Authorized Representatives may be designated in an application or service request in the Credit Union wire transfer agreement for business services as having Wire Transfer Authorization and all such individuals shall be, and hereby are, authorized on behalf of the Business, acting singly, to initiate by signature, actual or purported facsimile signature, or oral direction the transfer of funds by wire, telex, book entry or other means (hereinafter "wire transfers") from any account of the Business, where permitted by the Credit Union, and to delegate in writing from time to time to other persons the authority granted hereunder to initiate wire transfers on behalf of the Business.

BUSINESS ONLINE BANKING AUTHORIZATION

RESOLVED: That any one or more of the individuals identified below as Authorized Representatives may be designated in an application or service request as having Business Online Banking Authorization and all such individuals shall be, and hereby are, authorized on behalf of the Business, acting singly, to initiate by computer any Business Online Banking transaction, which may include without limitation, transferring funds between and making payments from eligible Business deposit accounts.

BORROWING

The credit union does not currently offer any business lending services at this time.

GENERAL

RESOLVED: That all appointments, designations, and delegations relative to the authority of any individual to act on behalf of the Business as set forth herein shall remain in full force and effect until the Credit Union's receipt of official written notice (accompanied by such evidence of the authority of the individual giving such notice as the Credit Union may reasonably require) of the revocation or modification of such authority; that the Credit Union may rely on this document until the Credit Union has actually received written notice to the contrary and has a reasonable period of time to act on such notice; and that the Business shall, and by adoption of these Resolutions does, agree to indemnify the Credit Union against any claim resulting from payments made pursuant to, or action taken in good faith reliance upon, any authorization contained in these Resolutions, including any actions taken after a change in the ownership, membership, management or legal structure of the Business but before the Credit Union has actual notice of such change and a reasonable period to act upon such notice.

RESOLVED: That any and all resolutions of the Business that are or may be in conflict with any of the foregoing be, and hereby are, revoked.

FACSIMILE SIGNATURE(S)

The Credit Union is hereby authorized and directed to honor checks, drafts, and other written orders for the payment of money to whomsoever payable, including those drawn to the individual order of a signer, drawing upon the business' account(s) with the Credit Union (even if an overdraft is created thereby) and bearing the facsimile signature(s) purporting to be that of any Authorized Representative identified below or otherwise in accordance with these resolutions. The Credit Union may charge the Business's account(s) with the Credit Union for any payment made by the Credit Union in good faith reliance (which shall be presumed) upon any such facsimile signature(s) appearing upon any check, draft, or other written order presented to the Credit Union regardless of by whom or by what means the actual or purported facsimile signature(s) may have been affixed or impressed. The Business assumes full responsibility for, and shall indemnify, defend, and hold the Credit Union harmless of and from any loss, liability or damage the Credit Union may suffer or incur on account thereof.

OTHER BUSINESS SERVICES

RESOLVED: That the individual whose name and title appears below as the primary Authorized Representative be, and hereby is, authorized on behalf of the Business, acting singly, to request that the Credit Union provide to the Business such other business services as the Credit Union may offer from time to time; that any one or more of the individuals identified below as Authorized Representatives may be designated in the application or request as having authorization to use such business services, and all such individuals shall be, and hereby are, authorized on behalf of the Business, acting singly, to use such business services, including to request and obtain from the Credit Union one or more personal identification numbers (PIN) for use with business Debit Cards, Night Depository, ACH, Origination Services, Online Banking, Bill Pay, Telephone Transfers.



AUTHORIZED REPRESENTATIVES

The undersigned certifies that the following individuals are empowered to act for and on behalf of the Business as Authorized Representatives in accordance with the authority prescribed herein. However, not all authorized representatives may be authorized to transact business on specific accounts/suffixes. Each signature card will delineate those signers who are authorized on a specific account/suffix.

Printed Name	Title	Signature
Signer 1		
Signer 2		
Signer 3		
Signer4		
IN WITNESS WHEREOF, I/We have signed this certif	icate on the	(date) I certify that, as of the date
hereof, each of the persons signing above is, as appli	icable, an officer, managing or general par	tner, manager or authorized member of the
Business with authority to bind the Business, and the	signature above is his/her true signature.	
Signature:		
Name:		
Title:		