



To: Troop and Service Unit Volunteers

Subject: Establishing or Changing Signers on a Girl Scout Bank Account

Hello – We are so grateful for your participation in Girl Scouts!

The following paperwork is to help you establish a new bank account or to help you update the current signers for your existing bank account. Please follow the instructions below:

Set up a new account:

1. Fill out the Amendment to Commercial Account Signature Card (2 pages)
 - a. Both signers must sign and print their names under section 2 and select the box marked “Authorized Signer”
2. Each signer must complete the Information Needed for Signers’ page and attach a copy of your ID or drivers license (must be readable)

Change signers on an existing account:

1. Fill out the Amendment to Commercial Account Signature Card
 - a. **To Add:** new signer must complete section 2 - new signer must sign & print their name and select the box marked “Authorized Signer”
 - i. New signer must complete the Information Needed for Signers page and attach a copy of their ID or drivers license
 - b. **To Remove:** existing signer must complete section 3

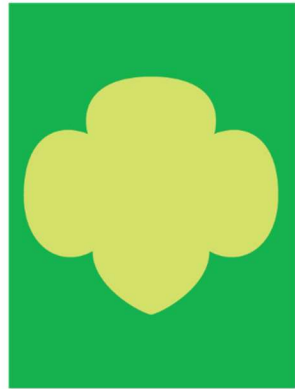
Be sure to include your troop number on all pages and return completed documents to the GSU Finance Department, email to: finance@gsutah.org or mail to:

Girl Scouts of Utah, Finance Dept.
445 East 4500 So., Suite 125
Salt Lake City, UT 84107-2639

Once paperwork is received, allow 4-6 weeks for processing. You will be issued an account number and receive debit cards from Wells Fargo Bank for troop or service unit use.

If you have any questions regarding your bank account, contact the GSU Finance Dept. at 801-265-8472 or email: finance@gsutah.org

Sincerely,
Girl Scouts of Utah



Mission:
building girls
of courage,
confidence,
and character
who make
the world
a better place.

Salt Lake City Office
445 East 4500 South
Suite 125
Salt Lake City, UT 84107
P: 801-265-8472

American Fork Office
215 North Center Street
American Fork, UT 84003

Ogden Office
3564 Lincoln Ave
Suite 4A
Ogden, UT 84401

www.gsutah.org

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Amendment to Commercial Account Signature Card

1. Account Title(s)

Add more accounts	Remove
Account #1: _____ CoID: 119	
Title Line 1: <u>Girl Scouts of Utah</u> Customer's full legal name matching Customer's formation documents – 40 characters max.	
Title Line 2: _____	
Title Line 3: _____	
Title Line 4: _____ If applicable, enter DBA name on last available title line.	

2. Amendment to Account Signers - Add

Add more signatures	Remove
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Signer #1 _____
 Signature _____ Printed Name _____
 Signer role; please select one. If none selected, the default will be limited signer. Refer to section 4 for authority definitions.
 Limited Signer Authorized Signer
 Internal use only: CIS customer number for above signer: _____

Signer #2 _____
 Signature _____ Printed Name _____
 Signer role; please select one. If none selected, the default will be limited signer. Refer to section 4 for authority definitions.
 Limited Signer Authorized Signer
 Internal use only: CIS customer number for above signer: _____

Signer #3 _____
 Signature _____ Printed Name _____
 Signer role; please select one. If none selected, the default will be limited signer. Refer to section 4 for authority definitions.
 Limited Signer Authorized Signer
 Internal use only: CIS customer number for above signer: _____

3. Amendment to Account Signers - Delete

Add rows	Remove
-----------------	---------------

Signer Name	Signer Name
Signer Name	Signer Name
Signer Name	Signer Name

4. Customer's Certification, Acknowledgement, and Agreement

By signing below, I certify that the Customer has designated each of the individuals named in Section 2 above as

- a) a "Limited Signer" who is authorized, acting alone, to (i) sign checks drawn on the account(s) and (ii) instruct Wells Fargo with respect to stop payment order(s); or
- b) an "Authorized Signer" who is authorized, acting alone, to (i) sign checks drawn on and make cash withdrawals from the accounts(s), (ii) instruct Wells Fargo with respect to stop payment order(s) and (iii) initiate funds transfers between accounts on Business Online Banking, and (iv) perform other branch transactions in accordance with the customer's contractual arrangements with Wells Fargo.

Designating signers on the signature card does not authorize the signer to access CEO®.

Wells Fargo may obtain credit reports or other information about the customer. Wells Fargo may disclose information about each account to its affiliates, to credit reporting agencies, and to other persons or agencies that, in Wells Fargo's judgement, have a legitimate purpose for obtaining the information.

I acknowledge that the customer has received the Wells Fargo Commercial Account Agreement and agrees its terms and conditions, as amended from time to time, will govern the account(s).

Printed Name	Position/Title
Signature	Date

5. Bank Use Only		
Banker Name:	Banker Telephone:	Banker MAC:
AU:	RAU:	Officer #:
Submitter Name:	Submitter Phone:	
Submit Edits		

Information needed for signers:

Full Legal Name: _____

Residential Address: _____

City: _____ State: _____ Zip: _____

Mailing Address (if different): _____

City: _____ State: _____ Zip: _____

Date of Birth: _____

Country of Citizenship: _____

Social Security Number: _____

Cell Phone Number: _____

Business Phone Number: _____

Employer: _____

Employer Since: _____

Job Title: _____

Primary ID:

Drivers License Number: _____

State: _____ Iss: ___/___/___ Exp: ___/___/___

Secondary ID:

Debit/Credit Card Issuer: _____ (i.e. Wells Fargo, other fin. inst.)

Type: _____ (i.e. Visa, MasterCard, etc)

Exp: ___/___/___

ATTACH A COPY OF DRIVERS LICENSE BELOW

Information needed for signers:

Full Legal Name: _____

Residential Address: _____

City: _____ State: _____ Zip: _____

Mailing Address (if different): _____

City: _____ State: _____ Zip: _____

Date of Birth: _____

Country of Citizenship: _____

Social Security Number: _____

Cell Phone Number: _____

Business Phone Number: _____

Employer: _____

Employer Since: _____

Job Title: _____

Primary ID:

Drivers License Number: _____

State: _____ Iss: ___/___/___ Exp: ___/___/___

Secondary ID:

Debit/Credit Card Issuer: _____ (i.e. Wells Fargo, other fin. inst.)

Type: _____ (i.e. Visa, MasterCard, etc)

Exp: ___/___/___

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