

Legal Name				Tax Identification (ID) Number		
DBA/Agency Name				Telephone Number		
Account Number(s)				I		
Physical Address		City		State	ZIP Code	
Mailing Address (if different)		City		State	ZIP Code	
List all current signers a	nd indicate if they should	remain as autho	rized or be removed	d. List new sig	ners to be added	
Authorized Signer 1	Title	Title		Authorization Status Remain Remove Add		
Telephone Number	Email Address	Email Address		Powers Granted* (select all that apply)  1 2 3		
Authorized Signer 2	Title	Title		Authorization Status Remain Remove Add		
Telephone Number	Email Address	Email Address		Powers Granted* (select all that apply)		
Authorized Signer 3	Title	Title		Authorization Status Remain Remove Add		
Telephone Number	Email Address		Powers G	Powers Granted* (select all that apply)		
Authorized Signer 4	Title	Title		Authorization Status Remain Remove Add		
Telephone Number	Email Address	Email Address		Powers Granted* (select all that apply)  1 2 3		
Authorized Signer 5	Title			Authorization Status Remain Remove Add		
Telephone Number	Email Address		Powers G	Powers Granted* (select all that apply)  1 2 3		
Authorized Signer 6	Title			Authorization Status Remain Remove Add		
Telephone Number	Email Address		Powers G	Powers Granted* (select all that apply)  1 2 3		
Additional Information						
	SCRIPTIONS: e account(s) in the name of the rs for the payment of money or		v or transfer funds on de	eposit with the B	ank of North Dakota	
I certify that I am a current a	authorized signer and authorize	ed to request chang	es to an existing accou	nt.		
Print or Type Name		Title				
Signature		1		Date		