

ments governing such Putable Advance.

Statement of Authority: Putable Advances

I am an officer of	Francisco ("Bank") to enter into and approve on behalf of mber by the Bank, and (ii) familiar with Member's level of they relate to Member's ability to evaluate the merits and able Advance product ("Putable Advance") offered by the established risk management and capital policies, and that
I represent that Member understands that there are certain in Putable Advances, and that there are circumstances in which to profile in these areas.	
I further represent that Member, prior to the use of any Putable (a) reviewed the terms and conditions of such Putable Advance (b) ensured that such Putable Advance is consistent with Memb (c) conducted all appropriate and necessary portfolio sensitivity analysis of the incremental effect of such Putable Advance of	and evaluated its price sensitivity; er's portfolio objectives and liquidity needs; and analyses for such Putable Advance, which may include an
Notwithstanding any general information that the Bank may giv Member understands that the Bank is not a financial or investr capable of evaluating both the merits and risks associated with pendently reviewed these merits and risks and the suitability of	nent advisor or fiduciary to Member, that Member is fully n Putable Advances, and that, in fact, Member has inde-
I further represent that Member has not relied, and will not rely, the risks associated with the use of Putable Advances. Without I not relied, and will not rely, upon any understandings with the E may or may not exercise its rights with respect to any Putable A	limiting the foregoing, I further represent that Member has bank concerning the circumstances under which the Bank

I acknowledge on behalf of Member that the use of Putable Advances is not the result of any direct solicitation or recommendation by the Bank, but is the result of Member's request arising from the ongoing business relationship between Member and the Bank.

Full Corporate Name of Member	Location of Member	
Authorized Signature	Name of Signer (Print or Type)	
Title	Date	
Authorized Signature	Name of Signer (Print or Type)	
Title	Date	

Note: This form must be signed in accordance with Member's authorizations on file with the Bank.