**<Name of PTA>**

**CERTIFICATE OF INCUMBENCY**

I, <Name>, certify that I am duly elected and acting Secretary of the <Name of PTA>, [a California nonprofit corporation][a California unincorporated association], and:

1. That the following are the duly elected and presently acting officers of the <Name of PTA>, and their true signatures appear opposite their respective names below.

Title of Officer Name of Officer Signature

President \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Treasurer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Secretary \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

<Office Title> \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. At its meeting on <date>, the board of directors of the <Name of PTA> adopted the following resolution: "RESOLVED, the authority of all currently authorized signatories on the <Name of PTA> checking account domiciled at the <Bank Name> branch located at <Bank Address>, is hereby revoked. The Board hereby appoints <Names of authorized officers>, acting together, as the only authorized signatories on such checking account, effective immediately. For clarity: The signatures of both <Names of authorized officers> are required on every check written against such checking account."

3. The resolution identified in item 2 immediately above has not been repealed, amended or superseded; rather, such resolution remains in full force and effect as of the date of this Certification, and <Names of authorized officers>, acting together, are and remain the only duly authorized signatories on the <Name of PTA> checking account domiciled at the <Bank name> branch located at <Bank Address>.

Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

<Name>, Secretary

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