

Team Name: _____

Purpose: Use this packet as a guide to setup and manage individual team checking accounts under the general authority of the Seattle United Football Club ("SUFC").

TO ACCESS TEAM ACCOUNTS

The SUFC Executive Director grants and manages team account access and online banking setup.

DEPOSITS Team Officers can conveniently deposit into their team accounts by using our pre-addressed deposit envelopes or by visiting a local HomeStreet Bank branch.

HomeStreet Bank also provides mobile deposit via mobile Banking. For information please contact Commercial Deposit Services at CDS@homestreet.com or contact our office at 206.753.3601 or 1.855.318.3737.

PAYMENTS Team Officers will typically access funds by writing checks or by using an ATM/debit card.

ON-LINE BANKING The SUFC Executive Director administers online banking access. Each team officer with online banking access must have a unique online banking user ID and password. Through the "Manage Alerts" function you can set up email notifications to be sent to the user when certain conditions are met (i.e. balances below a \$ threshold, incoming electronic debits/credits, etc.).

CUSTOMER SERVICE Commercial Deposit Services CDS@homestreet.com
206.753.3601 or 1.855.318.3737

TO CREATE A NEW TEAM ACCOUNT OR CHANGE AUTHORIZED SIGNERS

Team Officer: Check all Applicable

- I am a new officer for an *existing* team and we are removing former officer: _____, or
- I am a new officer for a *new* team

- Complete the "Agent and/or Temporary Signer Form", and for each authorized signer, attach a completed "Customer Information Profile" and a clear copy of signer's driver's license or passport.
Note: If necessary, coordinate and obtain these signed documents from additional team officer(s).

- Yes, I require new team account checks. Enter mailing address for delivery: _____

- Yes, I require access to Business online banking

Name: _____ Preferred User ID: _____ Email: _____

Cellular: _____ Home Phone: _____ (needed for on-line banking access)

- Yes, I require an ATM/Debit Card (Attach Business Visa Check Card Agreement in packet).

Name: _____

- Forward the packet by email to the Executive Director at executivedirector@seattleunited.com or via US Mail to Seattle United, 650 S. Orcas St, #220, Seattle, WA 98108.

SUFC Executive Director:

1. Authorize Agent Signers by signing the Resolution and completing and signing the Business Visa Check Card Agreement, if appropriate.
2. Create or update Team Officer online access through the Administration tab in online banking.
3. Return complete packet to Commercial Deposit Services, HomeStreet Bank, 33405 8th Ave South Federal Way, WA 98003.

Agent and/or Temporary Signer Form

Team Name: _____

Account Number: _____

AUTHORIZED AGENT(S)

I (We) hereby request the following authorities:

- Sign checks and withdrawals on my (our) team account at HomeStreet Bank, and I (we) hereby direct said bank to pay the same. This authority/assignment shall continue in force until revoked in writing by the undersigned officer of SUFC,
- Originate electronic payments from the team account (including ATM and/or check card transactions),
- Perform telephone transfer requests between the team's accounts at HomeStreet Bank, inquire and receive account history information, and request stop payments.

The undersigned agrees to be bound by the Terms and Conditions governing accounts at HomeStreet Bank (receipt of a copy is hereby acknowledged), and by any changes, modifications, or additions thereto.

X _____
Agent Name: _____
Title: Team Officer

X _____
Agent Name: _____
Title: Team Officer

RESOLUTION

I (We) hereby authorize and grant the authorities above to the "Authorized Agent(s)". I (we) further agree to indemnify and hold harmless HomeStreet Bank from any loss or damage it may sustain through relying upon the apparent authority of any agent **before** actual notice thereof is received by Commercial Deposit Services, HomeStreet Bank, 33405 8th Ave South, Federal Way, WA 98003.

X _____
Officer Name: _____
Title: Executive Director
Date: _____

REVOCATION OF AUTHORIZATION

This Authorization is hereby revoked upon receipt of this signed revocation by Commercial Deposit Services, HomeStreet Bank, 33405 8th Ave South, Federal Way WA 98003:

X _____

Officer Name: _____

Title: Executive Director



To help the government fight the funding of terrorism and money laundering activities, Federal Law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account (which include deposit accounts, loans, safe deposit, and investment accounts).

What this means for you: When you open an account, or are named as a signer on an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We will also ask to see your driver's license or other identifying documents. For business related accounts we will also require appropriate documentation to verify the existence of the business. Thank you for your cooperation.

Full Legal Name _____

Date of Birth (MM/DD/YYYY) _____

Residential Street Address _____

City, State, Zip Code _____

Social Security Number _____

Are you a U.S. Citizen? _____
If no, please indicate if you are a
Resident or Non-Resident Alien: _____

Customer "Code Word"
Used to identify you by Customer Service _____

Mother's Maiden Name _____

ID Type and Number _____
(i.e. Driver's License)
State of ID Issue _____

ID Issue & Exp. Dates _____

Your Employer _____

Your Title or Role at business _____

Cell/Bus/Home Phone Number _____

Your Contact Email Address _____

Note: A legible copy of the applicant's driver's license is also needed in order to complete the CIP.

The undersigned certifies the above information to be true and correct:

X _____

Signature of Individual Named Above

X _____

Date

Visa Business Check Card and ATM Card Agreement

This agreement, dated _____, _____ is between HomeStreet Bank and Seattle United FC (hereinafter referred to as "Customer").

Recitals

1. HomeStreet Bank offers its business depositors a Visa Business Check Card or an ATM Card whereby the depositor may use the card to make purchases and cash withdrawals which are debited against the depositor's account(s).
2. Customer maintains a business checking account with HomeStreet Bank, and is requesting a Visa Business Check Card or an ATM Card for use by its authorized employees and agents.

Agreement

HomeStreet Bank agrees to issue a Visa Business Check Card or an ATM Card to Customer. Customer will be responsible for determining which employees and agents are authorized to use the card(s), and what limitations to place on the use of the card(s) by the authorized employees and agents. All purchases, cash withdrawals, and cash advances made with the Visa Business Check Card(s) or ATM Card(s) will be debited against Customer's account number(s) _____. If any transaction made with any card causes the account to be overdrawn, Customer promises to pay the overdraft and applicable charges on demand.

Under Visa Operating Rules, Business Visa Check Card holders will not be held liable for any unauthorized **signature based** transaction. However, PIN-based transactions (those approved when you have keyed in your secret PIN) including ATM withdrawals are not covered by this rule, nor are they covered by the liability limitations of Regulation E which apply solely to consumer ATM and check cards. **PIN-based unauthorized transactions may not be reimbursed.**

Transactions performed by a business co-owner, a cardholder, or a person authorized by a cardholder, or other person with an interest in or authority to transact business on the account will not be reimbursed. Any transaction by a cardholder that exceeds the authority given by the Business Check Card account owner will not be reimbursed.

Except where protected by Visa's Zero Liability policy for unauthorized signature-based transactions, Customer agrees to indemnify and hold HomeStreet Bank harmless from all losses, claims, expenses (including attorney's fees and costs), and other liabilities that HomeStreet Bank incurs resulting from or in any way connected with the Visa Business Check Card or ATM Card issued to Customer, its agents or employees.

Customer's rights and responsibilities regarding the Visa Business Check Card and ATM Card are governed by this Agreement and the deposit agreement governing Customer's account(s) referenced above. In the event of any inconsistency between the terms of this Agreement and the deposit agreement regarding the Visa Business Check Card or ATM Card, the terms of this Agreement shall apply. HomeStreet Bank reserves the right to revoke or restrict the use of Customer's card at any time if, in HomeStreet Bank's sole discretion, we determine that the revocation or restriction is necessary. Customer hereby acknowledges that the provisions of Regulation E, including the dispute resolution process, do not apply to the Visa Business Check Card(s) or ATM Card(s) issued to Customer pursuant to this agreement.

The following individuals are authorized to be issued a Visa Check Card or ATM Card: (circle one)

Name Printed

Name Printed

Name Printed

Name Printed



Customer

Signature _____ Date _____
Name Kevin Long Title Executive Director

HomeStreet Bank

Signature _____ Date _____
Name _____ Title _____

This information is collected strictly for security purposes. In the event that unusual transactions occur on your card, you will be contacted by a security individual representing HomeStreet Bank. All fields are required in order to issue a card. Please complete cardholder information below.

Name Printed _____ Social Security Number _____
Date of Birth _____ Primary Identification _____
Code Word _____ Daytime Contact Phone _____
Signature x _____

Name Printed _____ Social Security Number _____
Date of Birth _____ Primary Identification _____
Code Word _____ Daytime Contact Phone _____
Signature _____