

Unit Code

01 October 2021

MEMORANDUM FOR Manager, Community Bank

SUBJECT: Authorization to Maintain Bank Account

1. Authorization to maintain a checking account at Community Bank is granted to the below named Unit Informal Fund or Solider and Family Readiness Group.

- 2. Account Information:
 - a. Organization Name: Name of Unit
 - b. EIN/TIN: XX-XXXXXX
 - c. Last four of Account #:
- 3. The balance of this account should not exceed \$10,000.
- 4. The expiration date for this letter of authorization is 2 years from the date listed above.
- 5. Point of contact is the below signed at, DSN: or CIV:, Email

Unit Commander Signature block