



## BUSINESS AUTHORIZED VOTER FORM

As a business entity, you may authorize at least one natural person to vote on behalf of the business (an “Authorized Voter”) on any or all matters that may require a vote of the membership of Golden 1 Credit Union (“Golden 1”). Such matters may include:

1. Election of Directors
2. Election of Supervisory Committee Members
3. Amendment of the Bylaws of Golden 1, except as prohibited by law
4. Any other matters which may properly arise at either the Annual Members Meeting or any special meetings of the members

You are not required to complete this form as a condition of your membership with Golden 1. Golden 1’s Bylaws provide more information about matters that may require a vote of the members, as well as general information about your voting rights. A copy of the Bylaws is available for inspection at our corporate headquarters in Sacramento, CA. We ask that you notify us in advance if you wish to inspect the Bylaws so that we can make suitable arrangements for you to do so.

### AUTHORIZATION TO VOTE

I hereby authorize the following Authorized Voter(s) to vote on behalf of the business on any or all matters that may require a vote of the membership of Golden 1:

Name (Please Print)	Title	Address	City	State	Zip

Name (Please Print)	Title	Address	City	State	Zip

I understand that if multiple Authorized Voters cast a vote on behalf of the business entity on a matter submitted to the members for a vote, the act of the majority shall bind the business. I further understand that if an Authorized Voter attends and votes at a meeting of members, it will revoke any Voting Proxy the business entity has granted to the Nominating Committee of the Golden 1 Board of Directors.

I certify that I have full power and authority to act on behalf of the business member, and that the business, by Resolution or otherwise, duly adopted in accordance with its charter, bylaws, and applicable law, is authorized to designate the abovenamed person(s) to vote on its behalf. Golden 1 may rely on this certification without inquiring further into the powers of the undersigned, the business, or the business’s officers, directors, partners, managers, members, or agents purporting to act on its behalf.

Member Organization Name: \_\_\_\_\_

Member Organization Account Number: \_\_\_\_\_

Signature of Authorized Signer: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name of Authorized Signer: \_\_\_\_\_ Title: \_\_\_\_\_

Return this form to Golden 1 Business Services, P.O. Box 15207, Sacramento CA 95851-0207 or email the signed form to [bussrvc@golden1.com](mailto:bussrvc@golden1.com).

CREDIT UNION USE ONLY	
OPENED:	ACCOUNT #:
BRANCH #:	OPENED BY:
DATE COMPLETED:	Name/Teller #