


# CollegeBound Saver

# CollegeBound Saver Organization Resolution Form

- Complete a separate form for each Account Owner for whom the organization serves as an Agent.
- This form identifies the officers or other persons who are authorized to conduct transactions on CollegeBound Saver Account(s) on behalf of an organization.
- Organizations covered by this form include: corporations; limited liability companies; professional corporations or associations; endowments; business trusts; and other entities or organizations.
- This form requires the signature of two authorized persons from your organization, one of whom must be the secretary or other authorized person who can certify the names of those authorized to access and transact on a CollegeBound Saver Account. If your organization has only one authorized signatory, then a bank officer, practicing attorney or member of a domestic stock exchange must countersign this form.
- This resolution remains in effect until we have been notified in writing that it has been revoked or a new **Organization Resolution Form** has been submitted. You must file a new **Organization Resolution Form** when there is any change in the identity of the persons authorized to act on behalf of your organization.
- Type in your information and print out the completed form, or print clearly, preferably in capital letters and black ink. Mail the form to the address listed. Do not staple.

Forms can be downloaded from our website at [www.collegeboundsaver.com](http://www.collegeboundsaver.com), or you can call us to order any form—or request assistance in completing this form—at **1.877.517.4829** any business day from 8 a.m. to 8 p.m. Eastern time.

 **1.877.517.4829**  
8 a.m. to 8 p.m. Eastern Time M-F

 [\*\*www.collegeboundsaver.com\*\*](http://www.collegeboundsaver.com)

Regular mailing address:  
**CollegeBound Saver**  
**P.O. Box 55986**  
**Boston, MA 02205-9714**

Overnight mailing address:  
**CollegeBound Saver**  
**95 Wells Ave, Suite 155**  
**Newton, MA 02459-3204**

## 1. Organization information

Name of Organization

Address

City

State

Zip Code



Firm Tax ID Number



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