ENTITY AUTHORIZATION

ENTITY CERTIFICATION		(Authorization Signer's name), certify that: I am a/the
(/	Authorization Signer's title) designated to act on behalf of	
	uthorizing Entity). Authorizing Entity is a	·
		. I am authorized and directed to execute an
•		else requiring a copy. Authorizing Entity is duly organized, validly existing
powers granted in this A power and authority to a the Agents and me to a dissolving or otherwise Financial Institution of the	Authorization and to carry on Authorizing Entity's buexercise the actions specified in this Authorization a act on its behalf. Authorizing Entity will notify Finar materially changing ownership, management or orguese material changes.	luly qualified, validly existing and in good standing in all jurisdictions where has the power and authority to provide this Authorization, to confer the usiness and activities as now conducted. The designated Agents have the not Authorizing Entity properly adopted these authorizations and appointed incial Institution before reorganizing, merging, consolidating, recapitalizing, anizational form. Authorizing Entity will be fully liable for failing to notify
☐ Authorizing Entity co		ional trade name or fictitious name of
-		izing Entity has the legal power and authority to use this trade name or
preserve Authorizing GENERAL AUTHORIZAT Institution) is designated rules and regulations fro are ratified by executio restrictions, to make all Authorization. The signa to in writing, this Author express written notice accompanied by docume proceeds from collateral SPECIFIC AUTHORIZATI Authorization:	Entity's existing name, trade names, fictitious name IONS. I certify Authorizing Entity authorizes and agree to provide Authorizing Entity the financial accommon time to time. All prior transactions obligating Authorization. Any Agent, while acting conther arrangements with Financial Institution which attures of the Agents are conclusive evidence of their rization replaces any earlier related Authorization and its revocation, modification or replacement. Any entation, satisfactory to Financial Institution, establish securing any debts owed to Financial Institution with	ees that: FIRST NATIONAL BANK (Financial dations indicated in this Authorization, subject to the Financial Institution's horizing Entity to Financial Institution by or on behalf of Authorizing Entity, is authorized, subject to any expressed are necessary for the effective exercise of the powers indicated within this r authority to act on behalf of Authorizing Entity. Unless otherwise agreed nd will remain effective until Financial Institution receives and records any revocation, modification or replacement of this Authorization must be hing the authority for the change. Authorizing Entity agrees not to combine h unrelated funds. End to act on behalf of Authorizing Entity in fulfilling the purposes of this Signature or Facsimile Signature.
(d)		
(e)		
(f)		
specimens within this A what means the signature Authorizing Entity	uthorization or the specimens that Authorizing Entit	nancial Institution may rely on those facsimile signatures that resemble the y periodically files with Financial Institution, regardless of by whom or by dicated, on Authorizing Entity's behalf to:
	Open or close any chare or deposit assessmts in A	Authorizing Entity's name, including, without limitation, accounts such as
	share draft, checking, savings, certificates of de overdraft line-of-credit accounts. Number of signature	•
	Enter into and execute any preauthorized electronic transfer agreements for automatic withdrawals, deposits or transfers initiated through an electronic ATM or point-of-sale terminal, telephone, computer or magnetic tape using an access device like an ATM or debit card, a code or other similar means. Number of signatures required	
		agreements that authorize transfers by telephone or other communication nstitution. Number of signatures required
		or discount by Financial Institution any and all deposit checks, drafts, orders for the payment of money owned or held by Trust. Number of

Entity Authorization
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	Sign checks or orders for the payment of money, withdraw or transfer funds on deposit with you. If Authorizing Entity
	authorizes and Financial Institution accepts this power with a multiple signature limitation, Authorizing Entity agrees to waive
	the multiple signatures requirement for any withdrawal in a format that does not allow Financial Institution an opportunity to
	examine signatures. Number of signatures required
	Enter into and execute a written night depository agreement, a lock-box agreement or a safe deposit box lease agreement.
	Number of signatures required
	Borrow money or obtain other credit or financial accommodation from Financial Institution on behalf of and in the name of
	Authorizing Entity on the terms agreed to with Financial Institution. The designated Agents may execute and endorse
	promissory notes, acceptances or other evidences of indebtedness. \Box If checked, the maximum outstanding credit limit for
	all available credit and financial accommodation to Authorizing Entity from Financial Institution must not exceed
	\$ Number of signatures required
	Grant a security interest, lien or other encumbrance to Financial Institution in any or all real or personal property that
	Authorizing Entity now owns or may acquire in the future for the payment or performance of:
	☐ Specific Debts. The debts, liabilities and obligations, and their renewals, extensions, refinancing and modifications,
	evidenced by (describe):
	☐ All Debts. All debts, liabilities and obligations of every type and description owed now or in the future by Authorizing
	Entity to Financial Institution.
	Number of signatures required
	Receive and acknowledge receipt for funds, whether payable to the order of Authorizing Entity or an Agent, without
	additional certification as to the use of the proceeds. Number of signatures required
	Guaranty the payment and performance of debts, liabilities and obligations owed to Financial Institution or its successors and
	assigns by (Borrower)
	Specific Debts. The debts, liabilities and obligations, and their renewals, extensions, refinancing and modifications,
	evidenced by (describe):
	☐ All Debts. All debts, liabilities and obligations, and their renewals, extensions, refinancing and modifications, that
	Borrower owes now or in the future to Financial Institution, to the extent allowed by law.
	Number of Signatures required
	☐ Grant a Security Interest. The designated Agents may also grant a security interest, lien or other encumbrance to
	Financial Institution in any or all real or personal property that Authorizing Entity now owns or may acquire in the future
	for the payment or performance of this guaranty. Number of signatures required
	Periodically amend, restructure, renew, extend, modify, substitute or terminate any agreements or arrangements with
	Financial Institution that relate to this Authorization. Number of signatures required
	Execute other agreements that Financial Institution may require, and perform or cause to be performed any further action
	necessary to carry out the purposes of this Authorization. Number of signatures required
	Other (specify)
	Number of signatures required
and are not to be us	Whenever used, the singular includes the plural and the plural includes the singular. The section headings are for convenience only sed to interpret or define the terms of this Authorization.
SIGNATURES . By s	signing, I certify and agree to the terms contained in this Authorization on behalf of Authorizing Entity on
	I also acknowledge receipt of a copy of this Authorization.
Pennsylvania. The	designation of an Agent does not create a power of attorney; therefore, Agents are not subject to the provisions of 20 Pa.C.S.A.
Section 5601 et se	eq. (Chapter 56; Decedents, Estates and Fiduciaries Code) unless the agency was created by a separate power of attorney. Any
provision that assig	ns Financial Institution rights to act on behalf of any person or entity is not subject to the provisions of 20 Pa.C.S.A. Section 5601
	; Decedents, Estates and Fiduciaries Code).
AUTHORIZATIO	N'S SIGNERS:
By:	By:
Name	Date Date Date
	FOR FINANCIAL INSTITUTION USE ONLY
Acct/Loan #	Authorization and agreement completed and effective
Ву	for the Financial Institution.

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