



**CATHOLIC DEVELOPMENT FUND
CERTIFICATE OF IDENTITY**

This is to certify that the person/s named and whose signature/s appear below, has/have been authorized to be signatory/s to the following account.

Account Name: _____

Account Number: _____

1. Name: _____

Signature: _____ ID Ref: _____

2. Name: _____

Signature: _____ ID Ref: _____

3. Name: _____

Signature: _____ ID Ref: _____

4. Name: _____

Signature: _____ ID Ref: _____

Contact Person: _____

Daytime Phone Number: _____

Signatory/s to operate this account:

Any one for telephone transfer to organisation cheque account

Any two of the above

Other (please specify) _____

Confirmed by: (for new accounts) _____

(CDF employee, Parish Priest, Justice of Peace, Solicitor, Bank Manager)

Date: _____

Signatures of Outgoing Officer: (for Existing Accounts) _____

Please provide copy of minutes authorising the opening of this account and/or a change of signatories.