

# SCHEDULE C

## FHLB Direct File Transfer User Authorization

Institution Name \_\_\_\_\_ (“Member” or “You”)  
 Member Docket # \_\_\_\_\_

By executing this FHLB Direct File Transfer User Authorization (“User Authorization”), you, the Member, authorize each employee identified below by a check in the Add column, to use FHLB Direct to send electronic document files to the Bank using the “Upload” function in FHLB Direct’s File Services module. You may also authorize an employee to Download a file from the Bank. By executing this User Authorization, Member agrees that each employee that it authorizes to transmit or receive files using FHLB Direct will be authorized to make those transfers using electronic verification and authentication mechanisms. That is, Member agrees that these employees will authorize the submission of information to the Bank (or receipt of information from the Bank) using their assigned PIN codes (or other FHLB Direct authentication mechanism then in effect), which shall constitute an authentication that shall have the same legal force and effect as a signed writing certifying the accuracy and completeness of the information contained in the file transfer.

This User Authorization is limited in scope to granting authority to engage in file transfers (Uploads and Downloads) using FHLB Direct in accordance with the FHLB Direct User Guide. An individual authorized to make direct file transfers pursuant to this Schedule C will hereby be authorized to send to the Bank any type of file that the Bank has stated it will accept in the FHLB Direct User Guide. For document files that the Bank requires be signed by an individual with specific corporate authority to authenticate the document, for example, a Qualified Collateral Report (“QCR”), the Bank will only deem the file appropriately signed if the file is sent by an individual who has **both** authority to transfer files pursuant to this Schedule C **and** authority to sign the document pursuant to the applicable corporate delegation or other authorization. The individual’s use of his or her PIN (or other FHLB Direct authentication mechanism then in effect) shall constitute the authenticating and certifying signature.

You may also use this form to take away file transfer authority from any employee by checking the box in the “Delete” column next to that employee’s name. And, you may also update the information about any employee by checking the box in the “Modify” column. Please note that you must specify authority for each function (Upload and Download). From time to time, the Bank may inform members of the document files that it will accept using the File Services Upload functions. The Bank reserves the right to change the list of documents that it will accept via FHLB Direct at any time and without notice. The Bank further reserves the right to require, at any time, that any individual member submit any specific document(s) on paper and in writing rather than accept the file through FHLB Direct. All terms defined in the FHLB Direct Services Agreement shall have their respective meanings herein, except as otherwise defined herein.

Add	Modify	Delete	Name	Title	Telephone number and Email Address	File Transfers	
						Upload Yes / No	Download Yes / No
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					

To add additional users, attach additional, fully executed copies of this page.

This User Authorization is a part of the FHLB Direct Services Agreement between the Member and the Bank. By signing below, the executing officer of Member certifies that he or she is fully authorized and empowered to amend the FHLB Direct Services Agreement and to effect the authorizations and other changes intended by this User Authorization. This User Authorization shall be effective when delivered to the Bank’s Operations Department in accordance with Sections 1.03, 5.04, and 5.05 of the FHLB Direct Services Agreement.

\_\_\_\_\_  
 Member Name

\_\_\_\_\_  
 Signature of authorized officer

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_