



# Delegation of Authority – Requests for Files from Custodian

## Federal Home Loan Bank of Des Moines

The undersigned, signers of the institution named below (the "PFI"), hereby delegate the authority previously granted to the undersigned by the PFI's Board of Directors to conduct transactions with the Federal Home Loan Bank of Des Moines ("Bank") as certified in that certain Resolution for Mortgage Partnership Finance® Program dated \_\_\_\_\_ to the following officers, employees and/or authorized persons of the PFI ("Designated Persons"), each acting individually, solely for the purposes of requesting (1) the release of the PFI's Collateral Files from the Custodian and/or (2) copies of any documents contained in such files held by the Custodian. For purposes of this Delegation of Authority, the term "Custodian" refers to the MPF® Program Custodian identified in the applicable MPF Selling Guide or to the alternate Custodian authorized by the MPF Provider for use by the PFI, as the case may be. The Bank and the Custodian shall be entitled to rely on any action taken within the scope of this delegation by any such Designated Person. The Designated Persons shall not have the authority to further delegate the powers designated herein.

This Delegation of Authority rescinds and supersedes all prior Delegations of Authority - Requests for Files from Custodian (Supplemental or otherwise) by the PFI with respect to the MORTGAGE PARTNERSHIP FINANCE Program on file with the Bank and the Custodian and shall be in full force and effect and binding upon the PFI until written notice of its rescission is delivered to the Bank and the Custodian, and each of the Bank and the Custodian has been afforded a reasonable opportunity to act on such notice.

### DESIGNATED PERSONS

Signature _____	Name _____	Title _____	Email _____
Signature _____	Name _____	Title _____	Email _____
Signature _____	Name _____	Title _____	Email _____
Signature _____	Name _____	Title _____	Email _____

IN WITNESS WHEREOF, the undersigned signers of the PFI who delegate authority hereunder have subscribed their names this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

PFI: \_\_\_\_\_

**The number of required signatures is determined by the MPF PFI Resolution. If the Member's Board of Directors requires one authorized signer then only one signature is needed. If the Member's Board of Directors requires two authorized signers then two signatures are needed.**

Signature: _____	Signature: _____
Name: _____	Name: _____
Title: _____	Title: _____

**Note: The individuals signing as designators will not be presumed to be Designated Persons unless their names, titles and signatures appear in the "Designated Persons" portion of this form.**