
Legal name of Nonprofit

Registered address

City, state and zip code

Country

POWER TO ACT ON BEHALF OF THE NONPROFIT

The undersigned _____ (hereinafter referred to as the
Name of Nonprofit

“Nonprofit”), duly represented by _____ ,
Full name of the signatory

_____, confirms that _____
Function of the signatory Full name of primary contact

is authorized to open an account with eBay Commerce Inc., accept all terms and conditions including user agreements and other policies. The authorized representative is also authorized to have full access to the eBay account and transactions in the name and on behalf of the Nonprofit.

I hereby declare that the above details are accurate and reflect the state of the Nonprofit as of the below signed date.

Full name of signatory

Signature and stamp

Date

