CUSTOMER PROFILE WORKSHEET PERSONAL ACCOUNTS

| NAME | | | DA | TE | |
|--|--|--------------------|------------------|------------|--|
| STREET ADDRESS | | | | | |
| CITY, STATE ZIP | | | | | |
| SSN / EIN | | DATE OF BIRTH | | | |
| EMPLOYMENT | | WORK PHONE | | | |
| | DOCUN | IENTARY VERIFICAT | ION | | |
| TYPE OF PRIMARY IDENTIF | ICATION: | | | | |
| Driver's License Passport US Military ID Resident Alien Card TYPE OF SECONDARY IDEN Social Security Card Utility Bill Property Tax Bill Student ID State ID Hunting/Fishing Licer Insurance Card Credit Card Statemer Visa (travel) Birth Certificate Tax Return - Signed Bank Statement Pay Stub | number number number ITIFICATION: (if n number number number number number | eeded) | - - - - | expiration | |
| | NON DOC | CUMENTARY VERIFICA | ATION | | |
| Welcome Letter Check Systems, Credit OFAC Other | t Report | | | | |

Type of Customer:

New

| F | _ | |
|---|---|--|

Existing loan customer adding new deposit service

Account opening method:

| | In | person |
|---|----|--------|
| _ | | |

- Mail
 - Telephone

Email, website

Type of Person

US person

Non US person

Type of Deposit

- Cash
- Payroll Check

Government Check

Personal Check

Other _____

What brought you to our bank?

| Pro | oduct |
|-----|-------|
| | |

Location

Dissatisfied with current bank her _____

Do you have any direct deposits?

Payroll

Social Security / Pension Other _____

Do you use automatic payments?

- Utilities
- Loan Payments

Credit Card Payments

- Insurance
- Other

What other services are you interested in?

Internet Banking

ATM

Safe Deposit Boxes

Wires

Lending

Overdraft Protection