

## Member FDIC | Equal Housing Lender Privacy Statement

## Personal Checking/Savings Account Application

First Name:		Last Name:		
Submitted on:				
Identification Procedures law requires all financial What this means for you information that will allow Security Notice:	institutions to obtain, verify, are When you open an account, or us to identify you. We may a this Application on-line if you	overnment fight the funding of ter nd record information that identific we will ask for your name, addres lso ask to see your driver's licens	rorism and money laundering activities, Federal es each person who opens an account. es, date of birth, social security number and other e or other identifying documents.  est security enhancements. If you don't have the	
<ol> <li>To safeguard your privmemory when you quit yo</li> <li>We will contact you to</li> </ol>	our browser. confirm and review your requ p provide photo identifcation a	restart it again after using this for est prior to you finalizing your pap	m. This form is NOT saved in your computer's perwork at one of our convenient locations. You	
First Name		Middle Initial	Last Name	
Date of Birth		Your E-mail Address		
	Home Phone		Work Phone	
Address Information	Address Line 1  Address Line 2  City	State	ZIP Code	
Subject to backup withholding	○ Yes ○ No			

Joint Account Holder (with right of survivorship)

First Name		Middle Initial	Last Name		
Date of Birth		Your E-mail Address			
	Home Phone		Work Phone		
Address Information	Address Line 1  Address Line 2  City	State	ZIP Code		
Subject to backup withholding	○ Yes ○ No				
	Accou	ınt Titling Information			
(required)	<ul><li>Individual</li><li>Joint</li><li>In Trust For</li><li>Custodial</li></ul>				
In Trust For (required)	Name				
Custodial (required)	Name				
	I/We would like to	apply for the following ac	count(s):		
Checking Accounts	Secure Checking  NOW Account Checking  eAccount Checking				
Savings Accounts	Regular Savings  Kids Club Savings  Christmas Club Savings				
	Health Savings Account				
Money Market Accounts	Money Market Account				

Mastercard Check/ATM Card	Mastercard Check Card  ATM Card		
Mastercard Check Card	O 1 O 2		
ATM Card	<ul><li>○ 1</li><li>○ 2</li></ul>		
The Internal Revenue Service does not require your consent to any provision of this document other than certification required to avoid backup withholding. See Taxpayer Identification Number Certification below.  Taxpayer Identification Number Certification: Under the penalties of perjury, I certify that  (1) the number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and  (2) I am not subject to backup withholding, or  (3) I am exempt from backup withholding, or  (6) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding, or  (7) The IRS has notified me that I am no longer subject to backup withholding, and  (8) I am a U.S. person (including U.S. resident alien).  Certification Instructions: You must cross out item (2) above if you have been notified by the IRS that you are currently subject to backup withholding because of under-reporting interest or dividends on your tax return unless you have received another notification form from the IRS that you are no longer subject to backup withholding.  I understand that if I do not provide a taxpayer identification number to Bank of Mauston within sixty (60) days, then Bank of Mauston is required to withhold twenty percent (20%) of all reportable payments thereafter made to me until I provide a number.  By submitting this application, I (each person jointly and severally) apply for the account(s) and Check/ATM card(s) listed above and a personal identification number. As an account owner, I am subject to all of its bylaws and rules as amended from time to time. I certify that all information given is correct. I understand and agree that for all accounts for I or, any one of us opens in the future is governed by this application, and all persons listed here will be owners, except as provided as follows: If I wish an account to have (as applicable) fewer, additional, or different owner(s), a completed, signed application for the specific account must be su			
(required)	I/We AGREE with the above statement		