



CORPORATE/ MINISTRY PERSONAL PROFILE

IMPORTANT INFORMATION: Federal law requires us to obtain sufficient information to verify your identity. You may be asked several questions and to provide one or more forms of identification to fulfill this requirement. In some instances, we may use outside sources to confirm the information. The information you provide is protected by our privacy policy and federal law.

Personal Information (A photocopy of your driver's license is required)

Name _____ Social Security/TIN # _____ DOB ____/____/____

Primary Phone (____) _____ Work Phone (____) _____ Mother's Maiden Name _____

Driver's License # _____ Exp. Date _____ DL State Issued ____ Occupation _____

Physical Address (No P.O. Box) _____ City _____ State _____ ZIP _____

Mailing Address (if different) _____ City _____ State _____ ZIP _____

E-mail _____

Signature and Certification

By signing below, I certify under penalties of perjury that (1) the Taxpayer Identification Number (TIN)/Social Security Number shown on this form is my correct TIN, and (2) I am not subject to backup withholding because: (a) I am exempt from backup withholding (and have written "Exempt" after my TIN on the TIN blank), or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has informed me that I am no longer subject to backup withholding. I am a U.S. person (including a U.S. resident alien). Derogatory Information may disqualify you.

Signature and Certification X _____ Date _____

9/11/2014

This area for credit union use only.

Member Number _____ FOM _____

Approved By _____ Date _____ Title _____

Disclosures are provided to the member, in person, when the account is opened or mailed if the member was not present.

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