UNIVERSITY OF SOUTH ALABAMA FEDERAL CREDIT UNION MASTER ACCOUNT AGREEMENT SIGNATURE CARD

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who open an account.

What that means to you: When you open an account, we ask for your name, address, date of birth, and other information that will allow us to identify you. We will also ask to see your driver's license and other identifying documents.

Name of Primary Account Owner	er:		
Account #:Date of Bi	irth:TIN/SS	N	
Physical Address of Primary Ac	count Owner:		
City	State:	Zip:	
Mailing Address of Primary Acc			
City			
Home Phone: ()	Work Phor	ne ()	
Cell Phone: ()	Email address:		
Occupation:	Employer:		
Nature of Business:	Eligibility:_		
Driver's License Number	State_	Exp. Date	
Alien Identification Number		Exp Date	
Passport Number	Country	Exp Date_	
Other Government Issued Docu	ment #(Country Exp Da	ate
Name of Joint Owner:			
Date of Birth			
Occupation:	Employer:		
Driver's License Number	State	Exp. Date	

Name of Joint Owner:					
Date of Birth	TIN/SSN				
Occupation:	Employer	Employer:			
Driver's License Number		State	Exp. Date		
	BIT CARD (ONLINE) BANK TELEPHONE) B				
AGREEMENT: By signing acknowledges receipt of and Master Account Agreement a Agreement and the Fee Scheare merged herein all prior ar subject matter hereof. Any redelay in enforcement of our rany of your obligations. If an remain in full force and effec By signing this card, you spe CREDIT UNION to check coin the course of establishing to By signing this you certify the	agrees to abide by the and the Fee Schedule dule, as amended, cond collateral represent epresentation, promising the under this agree y provision of this agree, the cifically authorize Upon your credit and entitle Account or review	the terms and of a samended institutes the stations, promose, or condition ement will regreement is described. NIVERSITY aployment his wing its use.	condition set forth in the act from time to time. The Mentire Agreement between nises, and conditions in coron not incorporated thereir stult in any loss of our right eemed invalid the rest of the YOF SOUTH ALABAM story and make whatever in	companying faster Account the parties. There nuection with the n is enforceable. No ats or relieve you of this Agreement will AFEDERAL nquiries necessary	
Date	Primary Accoun	nt Owner			
_	Joint Account C	Owner			
(Instructions to Primary Account that you are subject to backup from the IRS that the backup certification you sign below.)	p withholding due to withholding has term	payee under	reporting and you have no	ot received a notice	
CERTIFICATION AS T	TO TAXPAYER ID	ENTIFICA'	ΓΙΟΝ AND BACKUP W	ITHHOLDING	
Under penalties of perjury, I identification number and (2) the Internal Revenue Service interest and dividends, or the (3) I am a U.S. Person (included)	I am not subject to be (IRS) that I am subject IRS has notified me	backup withh ect to backup that I am no	olding because I have not withholding as a result of	been notified by failure to report all	
Date	D: 4				
	Primary Accoun	nt Owner			
	Joint Owner				