

TITLE OF ACCOUNT	ACCOUNT OR CERTIFICATE NUMBER
BANK NAME	DATE ACCOUNT OPENED

CHOOSE ONLY ONE

TYPE OF ACCOUNT - MARK WITH AN "✓"

<input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> JOINT* ONLY ONE SIGNATURE REQUIRED FOR PAYMENT OR WITHDRAWALS <input type="checkbox"/> SOLE PROPRIETORSHIP <input type="checkbox"/> OTHER _____	<input type="checkbox"/> SAVINGS <input type="checkbox"/> "NOW" <input type="checkbox"/> CHECKING <input type="checkbox"/> CERTIFICATE OF DEPOSIT <input type="checkbox"/> TIME _____ <input type="checkbox"/> P.O.D. - MUST USE WBA #382 <input type="checkbox"/> AGENT - MUST USE WBA #381
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THIS ACCOUNT AFFECTED BY ONE OR BOTH

<input type="checkbox"/> THE IDENTIFIED ACCOUNT NOT TRANSFERABLE EXCEPT WITH CONSENT OF BANK	<input type="checkbox"/> MMDA <input type="checkbox"/> OTHER _____
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The depositor agrees to be bound by the rules regulating this account and any amendment to them and acknowledges receipt of the account rules. If not a sole proprietor, the depositor acknowledges receipt of Truth-in-Savings disclosures.

**TAX WITHHOLDING CERTIFICATE: Under penalties of perjury, the depositor certifies that:**

(1) The taxpayer identification number shown on this form is the depositor's correct taxpayer identification number and (2) the depositor is not subject to backup withholding either because the depositor has not been notified that the depositor is subject to backup withholding as a result of a failure to report all interest or dividends, or because the Internal Revenue Service has notified the depositor that the depositor is no longer subject to backup withholding.

Strike part (2) of the paragraph above if the depositor has been notified that the depositor is subject to backup withholding due to underreporting and has not received a notice from the Internal Revenue Service that backup withholding due to notified payee underreporting has terminated.

The depositor is not a U.S. citizen or resident (or the depositor is filing for a foreign corporation, partnership, estate or trust). The depositor's permanent address is \_\_\_\_\_.

**Failure to provide a taxpayer identification number may subject the account to backup withholding. The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.**

DEPOSITOR'S SIGNATURE (1)	TAXPAYER I.D. NO.	DATE
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DEPOSITOR'S SIGNATURE (2)	TAXPAYER I.D. NO.	DATE
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**\*JOINT ACCOUNTS:** THIS ACCOUNT/CERTIFICATE OF DEPOSIT IS JOINTLY OWNED BY THE PARTIES NAMED HEREON. UPON THE DEATH OF ANY OF THEM, OWNERSHIP PASSES TO THE SURVIVOR(S). SUMS ON DEPOSIT ARE PAYABLE UPON THE REQUEST OF ANY ONE OF THE DEPOSITORS OR ANY SURVIVOR.

DEPOSITOR ADDRESS	PHONE
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CITY	STATE	ZIP
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EMPLOYER (1)	PHONE
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EMPLOYER (2)	PHONE
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DATE OF BIRTH	DRIVER'S LICENSE NUMBER	WEIGHT	HEIGHT	SEX
(1)				
(2)				

OTHER I.D.	(1)	
	(2)	

FIRST DEP. \$	OPENED BY	FROM
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**ACCOUNT DESIGNATION** [Bank - For sole proprietorship, use card with WBA75 ("Sole Ownership Depository Agreement"). Not for use with corporations.]

W. B. A. 380(13)(8/31/96) F11115

