

Account Information					
The following accounts are subject to this Master Agreement. The authorities granted to all Authorized Signers on this Master Agreement, and any beneficiary designations thereon, apply to all accounts noted on this Agreement and related addendums.					
Account Number	Account Subtitle	Product Type	Date Opened	Date Closed	Officer Initial

Signatures and Authorizations

By signing below, I/we agree, for all deposit accounts (whether one or more, the Accounts) that are now or subsequently opened with the Bank for the above-named individual(s) to enter into and to be governed by the rules, regulations and terms of this Master Deposit Agreement, the Personal Deposit Account Terms and Conditions, and the Information on Your Personal Account (Including Fees and Charges). Bank may amend these policies and terms or adopt new policies and terms applicable to the Accounts from time to time, and I/we will follow and be bound by the amended or new policies and terms upon written notice.

I/we authorize Bank to accept instructions from me/any one of us to close Accounts, open new Accounts in my/our name(s), and request account service, without requiring further original signatures from me/us. Bank may accept instructions from me/any one of us, whether by telephone, facsimile transmission or personal computer, with the same affect as if I/we had signed them. I/we agree to follow such security procedures as Bank may require and to provide my/our signature(s) if required. Bank may at any time refuse to accept such an instruction from me/us, and may also terminate this agreement at any time. I authorize Bank to record my/our telephone calls.

Customer 1

X _____

Customer 1-Print Name:

Customer 2

X _____

Customer 2 – Print Name: