

CASEY STATE BANK
BUSINESS CUSTOMER PROFILE
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 opens an account. **WHAT THIS MEANS FOR YOU:** When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents. If you are opening an account on behalf of a Legal Entity, you will be required to provide the appropriate documentation and to certify that this information is true and accurate to the best of your knowledge.

The undersigned agree that Casey State Bank is authorized to obtain a report under the Fair Credit Reporting Act. Casey State Bank may request this report and has the right to refuse to open an account based on the information received. This profile has been established to protect and verify your identity. Please fill out the information requested. All information will be held in strict confidence.

Signature _____ **Co-Applicant** _____

Type of Entity: Sole Prop Part. Corp. Estate- Trust-

Business Name: _____ TIN Number: _____

Mailing Address: _____

Physical address if different than above: _____

City: _____ County _____ State: _____ Zip: _____

Type of Business or Services offered: _____

How long in business _____ Business Phone: _____ PREVIOUS BANK: _____

Estimated Monthly Cash Deposits \$ _____

Direct Deposits? Yes No If yes, explain _____

Sell Wire Transfers? Yes No Check Cashing over 1,000 Yes No

Sell Money Orders? Yes No Privately Owned ATM Yes No If yes, see ATM Survey Form

Lottery? Yes No

Office Use- Note- On Corporate accounts the bank needs the articles of incorporation and should have this on file. **New accounts can print off of the SOS website. <http://www.sos.state.il.us/>** To verify the change request, the bank needs a "new" corporate authorization resolution and the minutes from the corporations last meeting where they noted the account change. You must verify all authorized individuals noted and appointed above and below. This should be clearly noted in the previous board minutes and a copy obtained. **Documentation must be on file for Trusts, Estates and POAs.**

Owner/Signer: _____ TITLE: _____

Address: _____

City: _____ State: _____ Zip: _____

Birthdate: _____ Home Phone: _____ Work Phone: _____ Cell Phone: _____

SS Number: _____ DL Number: _____ Issuing State: _____

FOR ADDITIONAL AUTHORIZED SIGNERS PLEASE COMPLETE ADDITIONAL SIGNERS PROFILE

For office use only: DATE: _____ Branch# _____

Type of account opened: _____ Acct. # _____

Amount of Deposit: _____ OFAC LIST Y or N

Primary Identity Verification _____

Secondary Identity Verification _____

Opened by _____

Authorized by _____ Risk rating assigned _____

Risk rating assigned approved By _____