

MEMBERSHIP/ACCOUNT ADDENDUM

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, physical 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. For Membership/Account Addendums received by mail/Internet, an Elements representative may contact you to verify the information supplied.

Primary Member Information						
First Name		<u>MI</u>	Last Name			
Add Joint Owner Name	Change 🔲 Add Attorney Fact (Recertification Form Required)	🗅 Add Guardian 🛛 🗅 Add Rep	resentative Payee		
laint Owner / Attorn	ey in Fact / Guardian ,	/ Poprocontativo D	waa Information			
Juiit Owner / Attorn	ey III Fact / Gual ulaii ,	representative Pa	iyee information			
First Name	MI	Last Name		Date of Birth	Social Security Number	
Home Street Address (No P.O. Boxes)			City	State	Zip Code	
Home Phone			Cell Phone		Work Phone	
Driver's License Number		Issuing State	Issue Date	Expiration Date		
Occupation		Email Address (Home Preferr	ed. Email address required for estate	ments and online hanking)		
				nience and entine banning.		
Phone Security Word (Select a word of	other than Mother's Maiden Name for u	se when calling Elements.)	Phone Security Word Hi	nt (Provide a hint we use to remind	you of your security word when calling Elements.)	
🗅 Order a Visa Debit Card for Join	t Owner					
List Impacted Accou	unt Numbers or Choo	se All Accounts:				
All Accounts						
Name Change						
Please provide a copy of go	vernment or legal document	s (e.g. Court Order or Driv	er's License) showing the n	ew name.		
Old Name			New Name			
TIN Certification & Bacl						
dividends on your tax return.		-			olding because you have failed to report all interest and	
Under penalties of perjury, I c 1) The number shown on t	ertify that: his form is my correct taxpay	er identification number (or	l am waiting for a number to	be issued to mel: and		
2) I am not subject to bac	kup withholding because: (a)	l am exempt from backup w	ithholding, or (b) I have not t	een notified by the Interna	al Revenue Service (IRS) that I am subject to backup	
withholding as a result	t of a failure to report all inter	est or dividends, or (c) the	IRS has notified me that I am	no longer subject to back	up withholding; and	

3) I am a U.S. person (including U.S. resident alien); and

4) The FACTA Code's entered on this form (if any) indicating that I am exempt from FACTA reporting is correct.

Authorization: I/we declare that the information provided is true and agree to notify Elements of any material change thereto. By signing, I/we agree to the terms and conditions of the Membership Agreement and Deposit Account Terms & Conditions, Fee Schedule and Deposit Rate Sheet as amended from time to time. I/we acknowledge receipt of a copy of the Membership Agreement and Deposit Account Terms & Conditions and disclosures. The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

Х		Х	
Primary Member Signature	Date	Joint Owner/Attorney in Fact/Guardian/Representative Payee Signature	Date
		X	
		Λ	
		Existing Joint Owner Signature	Date