

ON DEMAND TRANSFER APPLICATION

(Customer initiated ACH Debits/Credits using NetTeller)

CITIZENS BANK OF MUKWONAGO

ID NO. 39-0210030

Cust Name (1): _____ Cust Name (2): _____

Address: _____ City: _____ ST: _____ Zip: _____

Day Time Phone: _____ C; H; W _____ Email Address: _____
(Circle One)

NetTeller Acct #: _____ I want to transfer: _____ From CBM; _____ To CBM; _____ Both Ways
(Outgoing Xfers) (Incoming Xfers)

Other Financial Institution Info:

Bank Name: _____ Routing Number: _____ Max. Daily Transfer \$ _____
(Transfer limits > \$1,000.00 may

Account Number: _____ Checking; _____ Savings _____
require further credit approval)

Account Number: _____ Checking; _____ Savings _____

I have applied for the authorization to transfer funds between my Citizens Bank of Mukwonago account(s) and my bank account(s) as listed under the "Other Financial Institution Info" section above. By my signing this application, I authorize your bank representative to verify the information I supplied above.

I (we) hereby authorize CITIZENS BANK OF MUKWONAGO, hereinafter called BANK, to initiate DEBIT/CREDIT entries to my (our) account(s) indicated above at the depository financial institution named above, hereafter called DEPOSITORY. I (we) acknowledge that the origination of ACH transactions to my (our) account(s) must comply with the provisions of US law.

Upon approval, this authorization is to remain in full force and effect until BANK has received written notification from me (or either of us) of its termination in such a time and in such a manner as to afford BANK and DEPOSITORY a reasonable opportunity to act on it.

Note: Debits/Credits are only processed on business days. No processing on holidays. If Debit/Credit falls on a holiday or weekend, the Debit/Credit will be processed on the next business day. Allow up to 48 hours for Debit/Credit to post.

Fee per transaction: \$0.30 NSF or Returned Item Fee: \$28.00

Date _____ Signature _____ (Only one required)

Signature _____

Verification Process (for initiating Debits):

We will be initiating a small "TEST" deposit to the account(s) you have designated above for verification purposes. We can contact you by either _____ **Phone**; _____ **email** to notify you that the test transaction has been completed. You will need to provide us with (1) the amount of the transaction, and (2) a code that will look similar to this "CBM XXXXXXXX". Once that information has been verified we will complete your On Demand Transfer setup.

Please call 262-363-6500 and ask for Sean or Jonathan if you have any questions.

For bank use only:

CBM Employee Accepting Application: _____ Cust CIF _____

Date "TEST" was Entered on JHA: _____ By _____

Date acct(s) was verified on Bank Management: _____ By _____