

For Corporations, we request:

\_\_\_ Corp: \_\_\_ C-Corporation

Articles of Incorporation

\_\_\_ S- Corporation

EIN Form from the IRS

\_\_\_ Non-Profit

For LLC's, we request:

\_\_\_ Partnership

Certificate of Formation

\_\_\_ LLC: \_\_\_ C-Corp

If not a Single Member, the Operating Agreement

\_\_\_ S-Corp

EIN Form from the IRS

\_\_\_ Single Member

\_\_\_ Sole-Proprietor

## Business Account Service Questionnaire

To help us better meet your needs, please complete this brief questionnaire:

\*Business Name: \_\_\_\_\_ EIN # \_\_\_\_\_

\*Type of Business: (Convenience Store, ATM provider, Manufacturing, Consulting...) \_\_\_\_\_

\*Business Physical Address: \_\_\_\_\_

\*Business Mailing Address: \_\_\_\_\_

\*Business phone number: \_\_\_\_\_ Business E-mail: \_\_\_\_\_

\*Who is/are the owner(s) of this business? \_\_\_\_\_

\*Percentage each owns? \_\_\_\_\_

\*Source of funds for opening deposit: \_\_\_\_\_ Amount \$ \_\_\_\_\_

\*What types of products and services are you interested in or would like to hear more about?

\_\_\_ Business Checking \_\_\_ Certificates/Money Market \_\_\_ Debit Card \_\_\_ Domestic ACH/Wire credits/debits

\_\_\_ Foreign ACH/Wires- to which countries \_\_\_\_\_

\_\_\_ Online Banking \_\_\_ Bill Pay \_\_\_ Remote Deposit Capture \_\_\_ Mobile Banking

\_\_\_ Personal accounts \_\_\_ Business online banking capabilities

\*Expected volume of weekly activity: \$ \_\_\_\_\_ Cash Deposits; \$ \_\_\_\_\_

Cash Withdrawals # \_\_\_\_\_ checks deposited; # \_\_\_\_\_ paid checks/withdrawals

\*Do you engage in or process any transactions by or on behalf of online gambling? \_\_\_ Yes \_\_\_ No

\*Do you provide check cashing services to customers? \_\_\_ Yes \_\_\_ No

If yes, what is the dollar amount per person per day? \$ \_\_\_\_\_

\*Are you registered as a Money Service Business? \_\_\_ Yes \_\_\_ No

\*Are you engaged in any services related to the marijuana or hemp industry? \_\_\_ Yes \_\_\_ No