

Electronic Statement Application
(A separate application form is required for each primary account number.)

Name: _____ Last four digits of SSN or TIN number _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home Telephone: _____ Work Telephone: _____

Account Number: _____
_____ Checking account or _____ Savings account
Account Type (Please check one)

I am requesting to have statements for the account listed above made available for retrieval by me from my secure MBTeLink Internet banking access. **I understand that an email will be sent to the email address provided below informing me when a new statement is available for viewing. I do not want to have paper statements mailed to me.** I reserve the right to withdraw my consent at any time and resume receiving paper statements at the current applicable fee in affect at that time.

In the event of a change in my email address I agree to notify Monroe Bank & Trust of my current email address by telephoning the bank at (734)241-3431 or in writing addressed to Monroe Bank & Trust, Deposit Operations, 102 E Front St, Monroe, MI 48161. **I agree to hold Monroe Bank & Trust harmless if I fail to notify the bank of a change to my email address.**

Current eMail Address: _____ Please confirm Email: _____

Account Holder 1 Signature Date

Account Holder 1 printed name

Account Holder 2 Signature (if applicable) Date

Account Holder 2 printed name

Account Holder 3 Signature (if applicable) Date

Account Holder 3 printed name

What city were you born in? _____

Please download and view eStatement Disclosure Agreement.

You must read and accept our disclosure agreement in order to complete this application. Click on the Disclosure Document link above to read and find the application code necessary to complete this online form. The application code is located at the top of the disclosure.

I have read and agree to the disclosure above: _____
(enter code)

Forward completed application to: Monroe Bank & Trust, Deposit Operations, 102 E Front St, Monroe, MI 48161

Submitted by: _____ For bank use only
Port: _____ Date: _____

Entered by: _____ Date: _____ Verified by: _____ Date: _____

Electronic Statement Authorization Revocation

I hereby revoke my electronic statement authorization. Please resume mailing a paper statement to me. **I understand a fee may be imposed to resume receiving paper statements.**

Signature Date Joint Accountholder Signature (if applicable) Date

