

CD Automatic Renewal Acceptance

Due to new laws in 2018 First State Bank requires you to provide an acceptance on every certificate of deposit automatic renewal.

NAME 1: _____

NAME 2: _____

ADDRESS 1: _____

ADDRESS 2: _____

CITY: _____ STATE: _____ ZIP: _____

EMAIL ADDRESS: _____

CELL PHONE: 1. _____ 2. _____

Certificate of deposit # _____

In the amount of: \$ _____

Last Maturity Date: _____

This notice is to provide my (our) acceptance of the automatic renewal of the account listed above.

In addition, this is verification that the customer information listed above is correct. If the customer information is incorrect, please contact us.

We require the signature of at least one owner of this account.

Name: _____

Name: _____

Date Signed by Customer: _____

For internal use only:

Please send to Main CSR's for change of last contact date.

Maintenance date of last contact to the date signed by customer. Scan and Save in Aurora Docs under CD Renewal Acceptance form

Maintenance by Initials: _____

