

Account #:
Card #:
Portfolio #:
Banker Initials:

			PERSONAL A	ACCOUNT A	APPL	ICATION						
	Legal Name Ownership											
Signer 1												
	Check if existing customer:											
	Physical Address	City				State	Zip					
	Mailing/Alternate Address		C			City			State Zip			
	Social Security Number	Date of Birth	irth DL#			DL State			DL Iss		DL Exp	
									1			
	Home Phone		Cell Phone			Email						
	Current Employer		Occupation			Phone #		City/State				
	Purpose of Account How did you hear about Flagship Bank?											
	Legal Name					Ownership						
Signer 2	Check if existing customer: Check if physical address same as first applicant:											
	Physical Address		Cit			City			State Zip			
	Mailing/Alternate Address		(City			State	Zip		
	Social Security Number	Date of Birth	h DL#				DL State)	DL Iss		DL Exp	
	Home Phone Cell Phone				Email							
	Current Employer		Occupation			Phone #			City/State			
	Legal Name C							Ownership	wnership			
	Check if existing customer: Check if physical address sa				ame as first applicant:							
	Physical Address		City					State Zip				
Signer 3												
	Mailing/Alternate Address				City				State	Zip		
S	Social Security Number	Date of Birth	rth DL#		DL S		DL State		DL Iss		DL Exp	
	Home Phone	Cell Ph	Cell Phone Email									
	Current Employer		Occupation Phone #						City/State			
	Legal Name				Ownersh			Ownership				
						Sand Sang						
Signer 4	-			ldress same as first applicant:								
	Physical Address	<u>"</u>	Ci			City			State	Zip		
	Mailing/Alternate Address				City				State	Zip		
	Social Security Number	Date of Birth	th DL#		DL State					1	DL Exp	
	Home Phone	Cell Ph	ne		Email							
	Current Employer		Occupation		Phone #				City/State			

Designate Beneficiary(ies)												
Name			Address	Address				Date of Birth		SSN		
Name			Address	Address						SSN		
	Add POD Designa	dd POD Designation to all the accounts listed on application. Add POD Designation to all the accounts listed on application.					nation to a	ation to account number:				
Additional Products/Services												
		: .:'. DOO &	4 000/AT				0:4			D ("		
	Debit Card- Daily Limit: POS \$1,000/ATM \$309- Signer 1 Signer 2 Signer 3 Signer 4						Overdraft Protection					
	Checks, list desired quantity, and style:								Lending Services			
Online Banking/Mobile Banking									Credit Card			
Anticipated Account Activity												
As a full-service bank, we are committed to providing our customers with financial products and services that meet their complete financial needs. To assist us with determining whether the products and services you have selected are appropriate, please provide the following information												
Transaction Type Expected? If yes, select the total expected amount per month												
Cash Dep	ash Deposits Yes		No	o \$0.01-\$10,000		\$10,001-\$50,000 \$50,			0	\$100,001+		
Cash Withdrawals		Yes	No	\$0.01-\$10,000 \$10		\$10,001-\$50,000 \$50,00		001-\$100,000		\$100,001+		
ACH Credits		Yes	No	\$0.01-\$10,000 \$10		\$10,001-\$50,000 \$50,00		001-\$100,000		\$100,001+		
ACH Debits		Yes	No					001-\$100,000		\$100,001+		
Deposit Checks		Yes	No					,001-\$100,000		\$100,001+		
Write Checks		Yes	No	\$0.01-\$10,000				0,001-\$100,000		\$100,001+		
Domestic Wires In		Yes	No	\$0.01-\$10,000				001-\$100,000		\$100,001+		
Domestic Wires Out Foreign Wires In		Yes Yes	No No	\$0.01-\$10,000 \$0.01-\$10,000				001-\$100,000		\$100,001+ \$100,001+		
_		Yes	No	\$0.01-\$10,000				,001-\$100,000		\$100,001+		
Foreign Wires Out Virtual Currency In		Yes	No	\$0.01-\$10,000				,001-\$100,000		\$100,001+		
Virtual Currency Out		Yes	No	· · · ·				001-\$100,000		\$100,001+		
				Transaction Ac	count Appli	ication Dis	closure					
Minnesot	a law requires the foll	owing informa	ation to be	provided by one applica								
Have you	u had a transaction ac	count closed	by a bank/o	credit union without you	r consent with	nin 12 months	before making	this applic	ation?			
Yes No Reason:												
Have you been convicted of a criminal offense because of the use of a check or other similar item within 24 months of making this application?												
Have you		count with Els	agshin Ran	k or another hank/credit	t union within 1	12 months im	mediately pred	eding the a	nnlication? If	fives list the name of the		
Have you had a transaction account with Flagship Bank or another bank/credit union within 12 months immediately preceding the application? If yes, list the name of the bank/credit union below.												
Ye		Name:	5 .							16		
By signing this document, I authorize Flagship Bank to verify all information provided and obtain additional information regarding my personal financial history from a consumer-reporting agency or agencies and/or other financial institutions. I understand that this information will only be used in conjunction with Flagship Bank products and services requested by me and that it will remain in force for the duration of my association.												
I certify that the information provided by me is true and correct to the best of my knowledge. An applicant supplying a false material statement that is believed not to be true with respect to the information requested on the application is guilty of perjury.												
Signature(s)												
Sign							Date	Date				
Sign							D-t					
Sign								Date	Date			
Sign								Date	9			
Sign							Date	Date				



WIRE FRAUD ALERT



Internet Fraud - The use of internet services or software with internet access designed to defraud victims is on the rise across all types of business.

THESE SOPHISTICATED CRIMINALS COULD:

- <u>Hack into your e-mail account</u> or the e-mail account of others involved in your transaction and may direct you to wire money to the hacker's account instead of a legitimate account.
- Send fraudulent e-mails that appear to be from the person or entity that you are doing business with.
- Call you claiming that they have a sudden need to revise the wire instructions.

CUSTOMERS ARE ADVISED TO:

- 1. Never wire funds without verbally confirming the wire instructions directly with the intended recipient.
- 2. Verify that the contact information for the wire transfer recipient is legitimate by calling a known phone number for the individual or entity. Do NOT rely solely on the information given to you in an e-mail communication.
- 3. Never send your personal information through unsecured/unencrypted e-mail.

IF YOU SUSPECT WIRE FRAUD IN YOUR TRANSACTION:

- 1. Immediately notify Flagship Bank.
- 2. File a complaint online at the Internet Crime Compliant Center (IC3) at https://www.ic3.gov
- 3. Contact your local law enforcement.

Flagship Bank is providing this information to you in order to aid you in understanding the importance of taking measures to avoid being a victim of wire fraud. If you have any questions or concerns, please reach out and contact us at 952-944-6050.