USB Shazam CheckCard / ATM Card Application

| Last Name, (Primary Card Holder) | First Name | MI | Social Security Number | Birthdate | |
|---|--|--|--|---|--|
| Last Name, (Secondary Card Holder) | First Name | MI | Social Security Number | Birthdate | |
| Street Address | City | State | Zip Code | | |
| Home Phone Number | | Work Phone Number | | | |
| Cell Phone Number | | | | | |
| Initial here Link this card to my checking account # Initial here Link this card to my savings account # | | | | | |
| I authorize United State Bank with whom the that the Bank feels are necessary to evaluate a the CheckCard or ATM Card is issued. If this be in agreement with all the terms and conditions with the CheckCard and any future amend or anyone to whom I entrust my CheckCard of I understand if my CheckCard or ATM Card I authorize the United State Bank to issue a Charges, as indicated above. | my application. I agree to is application is accepted ions contained in the US Iments of said agreement or ATM Card. | hat this application and the card is is: B Shazam CheckO I agree to be lia I, I may be require | In shall remain the property of the Bank sued, I acknowledge and agree that I will card holder agreement disclosure statement ble for all transactions of any kind perfect to pay a replacement fee of \$5.00. | whether or not ill be deemed to nent to be sent to ormed by myself | |
| Primary Card Holder Signature | | Secondary Card Holder Signature | | | |
| Today's Date | | | | | |
| Like a Check, Only Faster and Easier! Ubetter. When you make a purchase using y have to do is sign the receipt. No need to vaccount statement with the place, date and | our CheckCard, the mo write a check. It's simple | ney is automaticate and it's fast. Ye | ally deducted from your checking accour purchases will be listed on your n | ount, and all you | |
| Accepted around the World! Your Check out of town. You can even use your card a about out-of-town checks. | | | | | |
| An ATM Card, TOO!! Although you'll apyour ATM Card, so you'll still have access around the world. | | | | | |
| When you have completed this application ATTN: Cashier, PO Box 8, Lewistown MO | | your nearest Uni | ited State Bank Office, or mail to: Ur | nited State Bank, | |

Internal Use: _____ This request is to hot card current card and request a new card. If yes,

the card number to be hot carded is ____