

Union State Bank NetTeller Authorization Form

Please print this form, complete it, sign where indicated and return to Union State Bank or enclose in an envelope and mail to: Union State Bank, PO Box 468, Hazen, ND 58545-0468.

I authorize and direct Union State Bank to set up my accounts for funds transfer on Union State Bank's NetTeller Online Banking service. By signing this application and using Union State Bank's NetTeller Online Banking, I agree to the terms and conditions of the Online Banking Agreement as found online at [www.betterstate.com](http://www.betterstate.com)  
**The signature of all account holders is required.**

\_\_\_\_\_  
Signature of Authorized Party

\_\_\_\_\_  
Signature of Authorized Party  
(if joint accounts)

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
E-mail Address

\_\_\_\_\_  
E-mail Address

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Date Signed

If there are additional accounts you would like to access through NetTeller Online Banking, please list them below by account number **OR** by social security number (all accounts under the social security number would be included). **The signature of all account holders is required.**

1. Account # \_\_\_\_\_ Account # \_\_\_\_\_

Account # \_\_\_\_\_ Account # \_\_\_\_\_

2. Soc. Sec. # \_\_\_\_\_ Soc. Sec. # \_\_\_\_\_

\_\_\_\_\_  
Signature of Authorized Party

\_\_\_\_\_  
Signature of Authorized Party  
(if joint accounts)

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Date Signed

Date Input: \_\_\_\_\_

Input By: \_\_\_\_\_

NetTeller ID#: \_\_\_\_\_

