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MONEY MANAGEMENT Checking Account Agreement

ACCOUNT OWNER											
Last Name	First Name							Middle Initial		Suffix (Sr., Jr., III)	
Member Number	Account Title (If Different f	rom above s	uch as D	BA; Estate	e of)			SSN o	r EIN		
Street Address										Dat	e of Birth
City	Stat			e Zip Occupation			n, profession or business				Employee ID#
Mailing address (If different):											
City State Zip						Zip					
							Service Requested ☐ ATM/Debit Card ☐ Direct Deposit				
Home Phone	Work Phone	Cell Phone	2		Email	nail Check Ap				Check Approval	
JOINT OWNER or OTHER AUTHORIZED USER											
Last Name		First Name						Middle Initial		Suffix (Sr., Jr., III)	
Member Number	Account Title (If Different f	rom above s	uch as D	BA; Estate	e of)	SSN or EIN					
Street Address	et Address [Dat	e of Birth			
City	State			Zip Occupation			n, profession or business				Employee ID#
Mailing address (If different):											
City State Zip											
	n method: Drivers License/ State ID DUS Military ID Other Service Requested Number: Expiration: ATM/Debit Card Direct Deposi						ect Deposit				
Home Phone	Work Phone	Cell Phone	2		Email Check A				Check Approval		
	JOINT	OWNER (or OTI	HER AL	JTHORIZE	D USER					
Last Name				t Name				Middle Initial		I	Suffix (Sr., Jr., III)
Member Number	Account Title (If Different f	rom above s	uch as D	BA; Estate	e of)		SSN or EIN				
Street Address										Dat	e of Birth
ty State			ate	Zip Occupation, p			n, prof	profession or business			Employee ID#
Mailing address (If different):											•
City								State Zip			
Identity verification method: □Drive Issued by:Nu						Service Requested ATM/Debit Card Direct Deposit					
Home Phone	Work Phone	Cell Phone	2	Email							Check Approval

AGREEMENT TERMS

I hereby authorize Palmetto Health Credit Union (Credit Union) to establish an account for me known as a Money Management Checking Account (Checking) and acknowledge this agreement is made in addition to my PHCU Account Card/Membership Account and Services Application (Account Card), as amended. Each applicant, authorized user or other party signing below (together herein referred to as "applicant(s)") hereby makes application for the checking account and agrees to conform to the

Bylaws, as amended, of PHCU. I certify the signature(s) on this agreement apply to this account; and all information provided on this agreement and the Account Card is true and correct. I also acknowledge that I have received and agree to be bound by any terms and conditions in this agreement, the Account Card, the Membership Booklet and Truth-in-Savings Act Rate and Fee Schedule (Schedule) as amended from time to time. I acknowledge this agreement is incorporated therein by reference. I acknowledge that in the event of any inconsistency in the terms and requirements of the various documents, the Membership Booklet shall prevail. I consent that PHCU may undertake to verify my eligibility for this or any account(s) and service(s) now and in the future. In addition, I authorize PHCU to make inquiry to determine my employment history and to obtain information concerning any accounts with other institutions and my credit history, including any credit reports. I specifically consent that PHCU may report information concerning my account(s) services to others; and may provide the reasons should it be determined I am ineligible for any services or to be an authorized person/user to the other applicants. I acknowledge that all present and future deposits to this account secure payment of any account owner's obligations to PHCU. If any representative capacity is indicated, PHCU shall provide all statements, notices and other information only to the person designated as having authority (e.g., a "trustee'). The Credit Union is authorized to pay checks signed by me/us and to charge the payment against the checking account. I agree to the following:

- (a) Only checks and/or other methods approved by PHCU may be used to withdraw funds from this checking account;
- (b) PHCU is under no obligation to pay a check that exceeds the balance in the account. PHCU may however, deposit into the account that unused portion of a pre-approved overdraft line-of-credit loan, resulting in addition(s) to said loan but shall not exceed the preapproved limit of said loan;
- (c) PHCU is under no obligation to pay a check that exceeds the balance in the checking account. PHCU may however, pay such a check and charge the amount of the resulting overdraft plus any service charge as disclosed in the Schedule against any other share account from which the person(s) who signed below is entitled to withdraw shares.
- (d) PHCU is under no obligation to pay a check on which the date is more than six months old;
- (e) Except for negligence, PHCU is not liable for any action it takes regarding the payment or non-payment of a check;
- (f) Any PHCU responsibility or liability respecting any item or transaction shown on a monthly statement of this checking account shall be waived, unless PHCU is notified in writing on or before the thirtieth day following the day the statement is mailed;
- (g) All non-cash payments received on shares in the checking account will be credited subject to final payment;
- (h) The checking account shall be subject to service charges in accordance with the Schedule as adopted by PHCU from time to time, for bounced checks, photo copies and stop payments;
- (i) The use of the checking account is subject to such other terms, conditions and requirements as PHCU may establish from time to time; and
- (j) If signed by more than one person, this agreement is subject to the additional terms and conditions of any joint share account agreement that applies to a share account in our joint names: or, if there is no such agreement this agreement is subject to the additional terms and conditions printed below.

PHCU is hereby authorized to recognize any of the signatures subscribed below hereof in the payment of funds or the transactions of my business for this account. The joint owners of this account hereby agree with each other and with PHCU that all sums now paid on shares, or heretofore or hereafter paid in on shares by any or all said joint owners to the credit as such joint owners with all accumulations thereon, are and shall be then jointly and equally with right of survivorship and be subject to the withdrawal(s) or receipt(s) of any of them and payment to any of them or the survivor or survivors shall be valid and discharge PHCU from any liability for such payment.

Any or all of said joint owners may pledge all or any part of the shares in this account as collateral security to a loan or loans. The right or authority of PHCU under this agreement shall not be changed or terminated by said owners, or any of them except by written notice to PHCU which shall not affect transactions theretofore made.

AUTHORIZED SIGNATURES								
By signing below you acknowledge and agree to all terms, conditions, certifications and representations you made herein.								
1		3						
Signature	Date	Signature	Date					
2								
Signature	Date							
PHCU USE ONLY								
OFAC search(es) conducted/reconciled: ☐ Member/Account ☐ Owner Joint Owner #1 ☐ Joint Owner #2 ☐ Other								
Comments:								
Account Opened: ☐ In Person ☐ By Mail ☐ Internet ☐ Other:								
Account opened. I in reson I by wan I internet I dure.								
The above applicant(s) membership, accounts & services are								
By:(Membership Officer) Date:								