eStatement Enrollment Authorization Form

eStatements will allow you to receive your statements and notices in an electronic delivery format. eStatements reduce paper clutter, eliminate delivery delays through the mail, eliminate Paper Statement Fees, and deliver your statements and notices more securely.

Customer Name:		
Check here if Customer has other accounts alr	eady enrolled for eStatements. (Verification will not be re	equired)
If already enrolled, is the customer enrolling	g these accounts under a different email address? (Verifica	ation WILL be required)
Initial Loan Account Number(s) listed and a	ny renewals, modifications or extensions thereof.	
Account Number(s):		
eMail Address:		
Add'l Recipient Name:	eMail Address:	
Add'l Recipient Name:	eMail Address:	
Complete this section ONLY if you are already	enrolled and need to change your delivery eMail ad	ddress.
Email address you are currently enrolled with:		
New Email Address:		
the email address that you provided, that includes a verific confirm that you can view an eStatement. If needed, institution confirmation is received, you will be successfully enrolled By completing this enrollment form, you are consenting account(s). You will no longer receive paper statements their email address(es). By disclosing additional email addressients. In the event your email address is changed, us Bank shall have no obligation or liability to any of the paran email notification on the day following your normal staryou chose will be included. If account ownership or email address changes occur, you us. You can also cancel your eStatement enrollment at a second content of the confirmation of the confirmati	g to receive all statements and notices electronically for the a or notices via US Mail. If you wish to have additional recipient dresses, you authorize Chippewa Valley Bank to send your eStating the procedure described above, by any authorized party to y ties to a multiple-party account if the email address is changed. tement cycle or when notices are generated. Instructions for the u are responsible to notify Chippewa Valley Bank of those changany time, without penalty or fees, by contacting us and signing contacted at 866-282-3501 or writing to us at PO Box 5, Winter, W	rification code to mail. When your bove-mentioned is, please include tements to those your account, the You will receive delivery method ges by contacting g an eStatement
Customer Signature	Date	
CVB Office Use Only		
ec'd by:	Date Rec'd:	
Rec'd in Person? No? → Callback Ph#: _	Callback Result:	
Acct Dept Use Only		
	2 nd Request 3 rd Request	
Acct Prod Changed to: eMail Address of Add'l Name Line Added:	on Name: Multiple Mailing/DD Code: Removed Date:	