



**Welcome to Oregon Pacific Bank!** We focus on building genuine relationships with our business clients, being there in person whenever you need us. *Ready to bank with local decision makers?* Fill out the information below and bring it into your local branch to get started.

Business Name	
Street Address	
Mailing Address (If Different)	
Tax Identification #	E-mail Address
Business Telephone Number	Business Fax Number
Type of Business <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> L.L.C. <input type="checkbox"/> Other	

**1st Signer**

Name	
Title	
Address	
Mailing Address (If Different)	
Home Telephone Number	
Work Telephone Number	
E-mail Address	
Date of Birth	Place of Birth
Social Security Number	
Mother's Maiden Name/Code Word	
Driver's License Number	State
Driver's License Issue Date and Expiration Date	
Secondary Identification	

**2nd Signer**

Name	
Title	
Address	
Mailing Address (If Different)	
Home Telephone Number	
Work Telephone Number	
E-mail Address	
Date of Birth	Place of Birth
Social Security Number	
Mother's Maiden Name/Code Word	
Driver's License Number	State
Driver's License Issue Date and Expiration Date	
Secondary Identification	

**Would you be interested in?**

- |   |  |
|---|--|
| <input type="checkbox"/> Checking Account       | <input type="checkbox"/> ATM or Debit Card       |
| <input type="checkbox"/> Savings Account        | <input type="checkbox"/> Overdraft Protection    |
| <input type="checkbox"/> Money Market Account   | <input type="checkbox"/> Corporate Credit Card   |
| <input type="checkbox"/> Certificate of Deposit | <input type="checkbox"/> Online Banking Services |

**Would you like an associate to contact you regarding?**

- |   |   |
|---|---|
| <input type="checkbox"/> Investment Services          | <input type="checkbox"/> Merchant Services        |
| <input type="checkbox"/> Wealth Management Services   | <input type="checkbox"/> ACH/Payroll Services     |
| <input type="checkbox"/> Residential Lending Services | <input type="checkbox"/> Online Bill Pay Services |
| <input type="checkbox"/> Commercial Lending Services  | <input type="checkbox"/> Cash Management Services |

**Please provide the following for faster service:**

- ▶ A voided copy of your current checks
- ▶ A copy of your deposit tickets
- ▶ The number of endorsement stamps you need
- ▶ Business Documentation:
  - For Corporations, please provide a filed copy of the Articles of Incorporation and a copy of the Corporate By-Laws.
  - For Sole Proprietorships, please provide a copy of the Assumed Business Name filing.
  - For LLCs, please provide a filed copy of the Articles of Organization and the Operating Agreement.
  - For Non-Profit and Unincorporated Associations, please provide a copy of the By-Laws, Charter or meeting minutes.
  - For Partnerships, please provide a copy of the Assumed Business Name filing.

Once your account(s) has been set up, your Client Service Specialist will be in contact with you to provide you with your disclosures and obtain your signature. At that time, they will also accept your opening deposit of \$100.00 or more.

***We are proud to be your business partner!***

**Important Information About Procedures for Opening A New Account**

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account.

What this means for you: When you open an account, we will ask for your name, address, date of birth, social security number or employer's identification number and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

