

Certificate and MMA Account Application

This Account shall be (check one):

- Individual Joint and a:
- Certificate Account (minimum deposit \$1,000)
- Money Market Account (minimum deposit \$2,500)
- Premier Money Market (minimum deposit \$25,000)
- Titanium Money Market (minimum deposit \$100,000)

Personal Information

Name (please print) _____ Account Number _____

Address _____

City/State/Zip _____

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Home Phone Work Phone

First Joint Tenant name (if any) _____ Social Security Number _____

Address _____

City/State/Zip _____

Second Joint Tenant Name (if any) _____ Social Security Number _____

Address _____

City/State/Zip _____

Initial Deposit

Select one of these options:

- Deposit the enclosed check(s) \$ _____
- Transfer funds from my credit union
Prime Savings Account \$ _____
- Transfer funds from my credit union
Checking Account \$ _____
- Transfer funds from another institution
(Please complete Transfer of Funds section) \$ _____
- Other
(please describe) _____ \$ _____

Total Deposit \$ _____

Transfer of Funds

To be completed **ONLY** if transferring funds from another financial institution.

To transfer funds from any savings association, bank or credit union, complete this section, enclose passbook or certificate (if any) or a copy of your most recent statement to be transferred and mail or bring to the credit union. After completion of transfer, your passbook or certificate will be returned to you promptly. This procedure is understood and accepted by all major financial institutions. (Note: The credit union assumes no responsibility for another financial institution's failure to honor this transfer authorization.)

To: _____

Pay to the order of FIRST ENTERTAINMENT CREDIT UNION

\$ _____ from my Account # _____

with you. Deposit \$ _____ to my credit union

Certificate Account # _____.

Optional

Pay-On-Death (P.O.D.) Beneficiary Designation

Distribution will be made equally unless indicated differently below. Between P.O.D. beneficiaries, there is no right of survivorship.

Name of 1st Beneficiary Social Security Number Distribution %

Address City State Zip

Name of 2nd Beneficiary Social Security Number Distribution %

Address City State Zip

For additional beneficiaries, attach a separate sheet.

Please see additional information on reverse.

To be completed by Certificate Account Applicants ONLY:

Select a Term— 6 months through 5 years

Term or maturity date desired _____

Renewal Options

Choose one of the following:

- Automatic Renewal Option**—I authorize the credit union to renew my Certificate at each maturity without further authorization. I understand that this automatic renewal option may be revoked by me at any time, and that I will receive notification of upcoming maturity dates and a confirmation of each renewal.
- Mail the balance from my matured Certificate to my address of record.**
- Transfer the balance from my matured Certificate into my Prime Savings Account.**

Disbursement of Certificate Dividends

Choose one of the following:

- Allow dividends to accumulate in my Certificate Account.**
- Transfer dividends to my Prime Savings Account.**

I understand and acknowledge that this account will be subject to applicable terms and conditions set forth in the Account Agreement and the Truth-in-Savings Disclosure.

Signature Date

First Joint Tenant's Signature Date

Second Joint Tenant's Signature Date

IMPORTANT: This application is not valid unless signed.

Please enclose your signed, completed application in an envelope and return to:

FIRST ENTERTAINMENT CREDIT UNION
P.O. Box 100, Hollywood, CA 90078-0100

F O R O F F I C E U S E O N L Y
Certificate ID Number: _____
Date Opened: _____
Teller ID Number: _____
Teller Initials: _____