



HOME BUYER SAVINGS ACCOUNT

Home Buyer Savings Account Signature Card

Account # _____

Ownership type (*Owners and ownership type must be identical to Main Share Account*)

Individual Trust Joint with rights of survivorship

Member Name _____	Joint Member Name _____
Street Address _____	Street Address _____
City, State, ZIP Code _____	City, State, ZIP Code _____
Home Telephone Number _____	Home Telephone Number _____
Business Telephone Number _____	Business Telephone Number _____
Social Security Number _____	Social Security Number _____
Mother's Maiden Name _____	Mother's Maiden Name _____

By signing below, I/we certify that the information listed on this signature card is true and correct. I/we acknowledge receipt of the terms and conditions applicable to this account, including a *Deposit Account Agreement, Truth in Savings Disclosure for the Basic Checking or Dividend Checking Account* and *Funds Availability Disclosure* and agree to the same, as amended from time to time. **I/we authorize you to verify the information provided by me/us through CheckSystems, Inc., and understand that the opening of this account is provisional, subject to a satisfactory report from CheckSystems.**

BONUS Check one (I am) / (I designate (name): _____) to be the recipient of any bonus that may be paid on this account at the time the recipient closes on a first mortgage loan with RTN Federal Credit Union for the purchase of a home. The bonus will be paid at closing and will be reported to the IRS on a 1099 form under the Social Security Number of the recipient. I also understand that, as owner, I reserve the right to change the recipient at any time.



Member Signature _____ Date _____

Joint Member Signature _____ Date _____

SEG # _____ CheckSystems #: _____

RTN FCU Employee Initials: _____ (Rev. 10/30/2006)