SECURITY STATE BANK
LOCALLY OWNED *SINCE 1903*

e-Statement Setup Form

03-2009

_____New User   _____Update Information

Customer Name_____

Email Address   _____

Birth Date (mmddyy) _____

Account Number(s) _____

_____

_____

_____

*User ID*_____
            (This can be your Internet Login if you have one.)

Lost Password Question   **(Select and answer One)**

What is your Mothers Maiden name? _____

In what city or town were you born? _____

What is the name of your pet? _____

I agree that I have the capability to receive my monthly account statement electronically and I also authorize Security State Bank to send it to me in this format. I also acknowledge that by accepting the e-Statement I will no longer receive a paper statement.

Signature_____ **Date**_____

Bank Use Only:

*Input By*_____ *Date*_____