

BUSINESS NEW ACCOUNT WORKSHEET

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, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

ACCOUNT OWNERSHIP Sole Proprietorship Corporation-For Profit Corporation-Not For Profit
 Partnership Limited Liability Partnership (LLP) Limited Liability Co. (LLC)
 Association _____ Other: _

ACCOUNT NAME _____

TAX IDENTIFICATION NUMBER _____ NAICS CODE _____

TYPE OF BUSINESS _____ YEAR ESTABLISHED/PURCHASED _____

TELEPHONE NUMBER _____ EMAIL _____

BUSINESS ADDRESS _____

MAILING ADDRESS (If different from above) _____

To provide you with the proper type of account for your needs please complete the following based on your monthly activity:

Average Balance _____ Volume of Cash: In _____ Out _____

Number of Checks Written _____ Number of Checks Deposited _____

Number of Wire Transfers _____ Dollar Amount Domestic _____

Countries Wired To _____ Dollar Amount Foreign _____

Services You Provide Check Cashing Money Orders Currency Exchange
 Money Transmission Travelers Checks Stored Value Cards

Do you use the internet to buy or sell your products or services? No Yes (If yes, use NAICS Code 454111)

Services Desired

Loans Or Lines Of Credit Remote Deposit Capture Online Banking Merchant Card Services

Information about the owner(s) or signers on the Account (Use additional worksheets, if necessary)

	FIRST OWNER/SIGNER	SECOND OWNER/SIGNER
NAME:		
STREET ADDRESS:		
CITY, STATE:		
SOCIAL SECURITY NO:		
HOME TELEPHONE NUMBER:		
BUSINESS TELEPHONE NUMBER:		
ALTERNATE TELEPHONE:		
DRIVERS LIC. OR ID NUMBER:		
DATE AND PLACE ISSUED:		
EXPIRATION DATE:		
EMPLOYER:		
OCCUPATION:		
BIRTH DATE:		
BIRTHPLACE:		
MOTHERS MAIDEN NAME:		
EMAIL:		

Bank Use: **ChexSystems** Date/State Issued _____ / _____ Date/State Issued _____ / _____
 Record _____ Retail _____ Record _____ Retail _____

Business Status Verified Yes No – Reason Waived Not Applicable

<p><u>SOLE PROPRIETORSHIP</u> <input type="checkbox"/> Fictitious Business Name Statement (Must be renewed every five years)</p> <p><i>If Available</i> <input type="checkbox"/> Business License</p>	<ul style="list-style-type: none"> ▪ Any individual using a name other than his/her legal name must file a Fictitious Business Name Statement with the County Clerk's Office. ▪ If issued the City Clerk
<p><u>CORPORATIONS</u> <input type="checkbox"/> Articles of Incorporation <input type="checkbox"/> Corporate Resolution <input type="checkbox"/> Fictitious Business Name Statement</p> <p><i>If Available</i> <input type="checkbox"/> Statement of information</p> <p><u>If Non-Profit</u> <input type="checkbox"/> IRS Form 501c or 503c</p> <p><u>Foreign Corporations (Out-of-State)</u> <i>In Addition to above listed items</i> <input type="checkbox"/> Certification of Qualification to do Business in California</p> <p><i>If Available</i> <input type="checkbox"/> Statement and Designation By Foreign Corporation</p>	<ul style="list-style-type: none"> ▪ Articles must be certified by the Secretary of State ▪ Authorizing account and signers, certified by the secretary of the corporation lists corporate officers ▪ Needed only if doing business other than listed on articles ▪ Statement of Information filed annually ▪ Indicates Exempt Status ▪ Documents must be filed with the Secretary of State ▪ Documents must be filed with the Secretary of State
<p><u>GENERAL PARTNERSHIP</u> <input type="checkbox"/> Partnership Agreement or a Partnership Resolution. <input type="checkbox"/> Fictitious Business Name Statement</p> <p><i>If Available</i> <input type="checkbox"/> Business License</p>	<ul style="list-style-type: none"> ▪ Title page, the signature page and the pages delineating authority. ▪ Needed only if doing business other than listed on partnership agreement ▪ If issued the City Clerk
<p><u>CALIFORNIA LIMITED PARTNERSHIP</u> <input type="checkbox"/> Certificate of Limited Partnership Form LLP-1 <input type="checkbox"/> Partnership Agreement</p>	<ul style="list-style-type: none"> ▪ Filed with the Secretary of State ▪ Title page, the signature page and the pages delineating authority
<p><u>LIMITED LIABILITY COMPANY 'LLC'</u> <input type="checkbox"/> Articles of Organization Form LLC-1 <input type="checkbox"/> Statement of Information LLC-12 <input type="checkbox"/> Operating Agreement</p> <p><i>If Available</i> <input type="checkbox"/> Business License</p> <p><u>Foreign LLC (Out-of-State)</u> <i>In Addition to above listed items</i> <input type="checkbox"/> Application for Registration LLC-5 and Certificate of Good Standing</p>	<ul style="list-style-type: none"> ▪ Filed with the Secretary of State ▪ Filed Biennially with the Secretary of State ▪ Identifies members duties ▪ If issued the City Clerk ▪ Filed with the Secretary of State, issued by State where company was organized (or a declaration certificate not issued by that state)
<p><u>ATTORNEY CLIENT TRUST</u> <i>In Addition to documentation based on Ownership</i> <ul style="list-style-type: none"> ▪ State Bar EIN </p>	<ul style="list-style-type: none"> ▪ State Bar of CA 94-6001385
<p><u>ASSOCIATION OR ORGANIZATION</u> <input type="checkbox"/> Fictitious Name Statement <input type="checkbox"/> By-laws, Charter and/or Meeting Minutes <input type="checkbox"/> Association Resolution</p>	<ul style="list-style-type: none"> ▪ Not needed if a Church, Labor Union, Fraternal and Charitable Organization or Non-Profit Hospital ▪ Used to verify ability to open accounts and individuals authority to act ▪ Certified by the Secretary
<p><u>MISCELLANEOUS ITEMS</u> <input type="checkbox"/> Franchise <input type="checkbox"/> Political Action Committee/Candidate</p>	<ul style="list-style-type: none"> ▪ Franchise Agreement ▪ Candidate Intention Statement, California Form 501 ▪ Statement of Organization Recipient Committee, California Form 410 (required if receives contributions of \$1,000 or more)

For Legal entities not listed, see a New Accounts representative for the required legal documentation.