



**MISSISSIPPI
FEDERAL
CREDIT
UNION**

PO Box 55889
Jackson, MS 39296
1-800-643-1567

Member Account Agreement

New Update Date _____ SSN: _____ DOB: _____ Are you a US Person: Yes No

Important Account Opening Information. Federal law requires us to obtain sufficient information to verify your identity. You may be asked several questions and to provide one or more forms of identification to fulfill this requirement. In some instances we may use outside sources to confirm the information. The information you provide is protected by our privacy policy and federal law.

Account Type: Savings Checking Other _____ Other _____

OWNER / SIGNER 1

Name		Field of Membership	
Driver's License / State ID	Passport	Other ID	
Physical Address			
Mailing Address (If different from physical address)			
Email	Home Phone	Cell Phone	Work Phone
Employer	Position/Title	How Long	
Employer City and State	Work Email		

OWNERSHIP OF ACCOUNT

The specified ownership will remain the same for all accounts

Individual Joint with Survivorship (not as tenants in common) Joint with No Survivorship (as tenants in common)

BENEFICIARY DESIGNATION:

Revocable Trust _____

Primary Beneficiary Name	DOB	Secondary Beneficiary Name	DOB
Phone #	SSN	Phone #	SSN

SIGNATURE(S)

The undersigned authorize the credit union to investigate credit and employment history and obtain reports from consumer reporting agency(ies) on them as individuals. Except as otherwise provided by law or other documents, each of the undersigned is authorized to make withdrawals from the account(s), provided the required number of signatures indicated above is satisfied. **The undersigned agree to the by-laws of the credit union and additional documents and disclosures the Credit Union has provided, as amended from time to time, and as applicable to the accounts and services requested herein.**

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

Backup Withholding Certifications

(If not a "U.S. Person", certify foreign status separately)

By signing signature field (1) on this document, I certify under penalties of perjury that the statements made in this section are true and that I am a U.S. citizen or other U.S. person (as defined in the instructions).

Taxpayer I.D. Number - TIN: _____ The Taxpayer Identification Number (TIN) shown is my correct taxpayer identification number.

Backup Withholding. I am not subject to backup withholding either because I have not been notified that I am subject to backup withholding as a result of a failure to report all interest or dividends, or the Internal Revenue Service has notified me that I am no longer subject to backup withholding.

Exempt Recipients. I am an exempt recipient under the Internal Revenue Service Regulations. Exempt payee code (if any) _____

FATCA Code. The FATCA code entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

1. X _____ Date: _____ 2. X _____ Date: _____

3. X _____ Date: _____ 4. X _____ Date: _____



**MISSISSIPPI
FEDERAL
CREDIT
UNION**

PO Box 55889
Jackson, MS 39296
1-800-643-1567

Member Account Agreement

OWNER / SIGNER 2

Name		Field of Membership	SSN	DOB
Driver's License / State ID	Passport		Other ID	
Physical Address				
Mailing Address (If different from physical address)				
Email	Home Phone	Cell Phone	Work Phone	
Employer	Position/Title		How Long	
Employer City and State		Work Email		

OWNER / SIGNER 3

Name		Field of Membership	SSN	DOB
Driver's License / State ID	Passport		Other ID	
Physical Address				
Mailing Address (If different from physical address)				
Email	Home Phone	Cell Phone	Work Phone	
Employer	Position/Title		How Long	
Employer City and State		Work Email		

OWNER / SIGNER 4

Name		Field of Membership	SSN	DOB
Driver's License / State ID	Passport		Other ID	
Physical Address				
Mailing Address (If different from physical address)				
Email	Home Phone	Cell Phone	Work Phone	
Employer	Position/Title		How Long	
Employer City and State		Work Email		