



Delavan Location
820 E. Geneva Street
Delavan, WI 53115
262-728-2265

Sharon Location
114 Plain Street
Sharon, WI 53585
262-736-4414

Clinton Location
501 Ogden Ave.
Clinton, WI 53525
608-676-4700

Lake Geneva Location
200 Interchange North
Lake Geneva, WI 53147
262-248-7800

www.communitybankcbd.com

eStatement/eNotice Enrollment

- New Enrollment
- Add Accounts/Notices to Existing Enrollment
- Change Email Address to Existing Enrollment
- Cancel Enrollment

Please fill out completely, print and mail this enrollment form to:

Community Bank CBD
Attn: Bookkeeping
P.O. Box 648
Delavan, WI 53115

Email Address _____
(Required Field)

Or deliver in person to any
Community Bank location.

Name: _____ SSN: _____
_____ SSN: _____

Account Type(s):	Account Number:	Notices Y/N:
<input type="checkbox"/> Checking <input type="checkbox"/> Savings/CD <input type="checkbox"/> Loan	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> Checking <input type="checkbox"/> Savings/CD <input type="checkbox"/> Loan	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> Checking <input type="checkbox"/> Savings/CD <input type="checkbox"/> Loan	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> Checking <input type="checkbox"/> Savings/CD <input type="checkbox"/> Loan	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> Checking <input type="checkbox"/> Savings/CD <input type="checkbox"/> Loan	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> Checking <input type="checkbox"/> Savings/CD <input type="checkbox"/> Loan	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO

Your enrollment for eStatement and/or eNotice will allow you to receive your bank statement and/or notice through the convenience and security of Internet banking. You will receive a notice by email when your statement and/or notice is available to be retrieved through internet banking. If you do not view your statement and/or notices, we are required to email you up to 3 notices. To be eligible to receive eStatements/eNotices, you must:

1. Have an access ID and Password for internet banking
2. Agree that you will no longer receive a paper copy of your statement and/or account notices via U.S. mail.
3. Notify the bank if you email address changes.

You have the right to cancel this eStatement/eNotice enrollment at any time by notifying the bank in person, by phone at 262-728-2265, or mail to Community Bank CBD, P.O. Box 648, Delavan, WI 53115.

I accept the terms of this enrollment and acknowledge that I am able to read and retain the disclosures in this statement.

Signature _____ Date: _____

TERMINATION

I wish to terminate my enrollment for eStatement/eNotice and receive my statements via U.S. mail.

Signature _____ Date _____

Internal Use Only

Date enrollment completed: _____ Work completed by: _____