



The Commercial & Savings Bank
PO Box 232, Millersburg, OH 44654

individual retirement account *application*

Please print this application and submit through postal service or fax to 330-674-4941.
You may also visit any CSB Banking Center to open an account.
We reserve the right to accept deposits through our local market area only.

Name: _____ SSN/TIN: _____ DOB: _____

Name: _____ SSN/TIN: _____ DOB: _____

E-mail: _____ Home Phone: _____

Address: _____

Sections 1 through 5 are required to process your application. On Section 1 & 4, please mark only one selection. If you wish to open more than one account, please complete a separate application for each.

1. CHOICE OF REGULAR CD TERMS:

- 30 Day 18 Month 4 Year
- 1 Year Variable 2 Year 5 Year
- 1 Year 3 Year

2. INTEREST PAYMENT OPTIONS:

- Compound/Credit Monthly
- Pay by Check
- Deposit into Checking or Savings Account Number: _____

3. PAYMENT METHOD (Annual Percentage Yields are calculated on \$1,000 and on monthly compounding/crediting unless otherwise stated.):

- Monthly Annually
- Quarterly At Term

4. NEW OR EXISTING CUSTOMERS:

Existing Customers: Transfer \$ _____ from account # _____

(No funds will be transferred until the signed signature cards have been returned to CSB.)

New Customers: To sign up for a new account with The Commercial and Savings Bank, please visit your nearest Banking Center location. (To prepare your required forms in advance, select the Banking Center you will be visiting.)

- | | | |
|---------------------------------------------------------|----------------------------------------------------------|------------------------------------------------------|
| <input type="checkbox"/> Berlin Banking Center | <input type="checkbox"/> New Philadelphia Banking Center | <input type="checkbox"/> Sugarcreek Banking Center |
| <input type="checkbox"/> Charm Banking Center | <input type="checkbox"/> North Canton Banking Center | <input type="checkbox"/> Walnut Creek Banking Center |
| <input type="checkbox"/> Gnadenhutten Banking Center | <input type="checkbox"/> Orville | <input type="checkbox"/> Winesburg Banking Center |
| <input type="checkbox"/> Millersburg | <input type="checkbox"/> High Street Banking Center | |
| <input type="checkbox"/> Clinton Commons Banking Center | <input type="checkbox"/> SR 57 Banking Center | |
| <input type="checkbox"/> South Clay Banking Center | <input type="checkbox"/> Shreve Banking Center | |

5. By signing below, I certify that the information provided is true and accurate. I authorize The Commercial and Savings Bank to verify any information included in this application and give permission for my funds to be transferred.

Customer's Signature: _____ Date: _____



INTERNAL USE ONLY | INTERNAL USE ONLY | INTERNAL USE ONLY | INTERNAL USE ONLY | INTERNAL USE ONLY | INTERNAL USE ONLY

Processed Date: _____ By: _____ Date Cards Received: _____

