



First State Bank of Porter  
**Check Image Service**  
Enrollment Form – Agreement

I agree to pay a Check Images Fee\* for the receipt of check images in my First State Bank of Porter periodic statement. I understand this fee will be automatically charged to the account for which the images are requested. The service and fee will continue until I notify the Bank in writing to discontinue and cancel this agreement. I understand the fee is subject to change.

\*currently \$3.00 per month (2009)

Name of Account: \_\_\_\_\_

Account Number: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*\*\*

**Bank Use:** Stmt Cycle: \_\_\_\_\_ Effective: \_\_\_\_\_ Input by: \_\_\_\_\_