



TIN Certification Account Agreement

SURVIVORSHIP ELECTION

CREDIT UNION ACCOUNT NUMBER: _____

Please select one of the following account types:

- Individual**
- Joint Account with Right of Survivorship:** On the death of a party to the account, the deceased party's ownership in the account passes to the surviving party or parties to the account.
- Joint Account -No Survivorship:** On the death of a party to the account, the deceased party's ownership in the account passes as part of the party's estate under the party's will, trust or by intestacy.

CONGRESSIONAL FEDERAL CREDIT UNION ACCOUNT AGREEMENT

I hereby make application for membership in and agree to the Bylaws, as amended, of Congressional Federal Credit Union (the "Credit Union"). I certify that I am within the field of membership of this Credit Union; the information I provided on this application is true and correct; and my signature on this form applies to all my accounts under my name at this Credit Union and constitutes a request for any identifying number and/or access device issued by the Credit Union in connection with such account. I authorize the Credit Union to obtain a credit report and verify other information in connection with this application for membership. I also agree to be bound to the terms and conditions of any account that I have in this Credit Union now and in the future. I acknowledge receipt of the "About Your Accounts" Agreement and Disclosure and, if applicable, W-9 instructions.

Credit Report Authorization: You promise that everything you have stated in your application is correct to the best of your knowledge. If there are any important changes, you will notify us in writing immediately. You authorize the Credit Union to obtain credit reports in connection with this application for membership, other services and any application for credit and for any update, increase, renewal, extension, or collection of the credit received or services received. You understand that the Credit Union will rely on the information in this application and your credit report to make its decision. If you request, the Credit Union will tell you the name and address of any credit bureau from which it received a credit report on you. It is a federal crime to willfully and deliberately provide incomplete or incorrect information on loan applications made to federal credit unions or state chartered credit unions insured by NCUA.

You have received and read the LOANLINER Credit and Security Agreement and the Addendum ("Agreement"). By signing below you agree to be bound by the terms of the Agreement. If you are applying for a credit card, you understand that use of your credit card will constitute acknowledgement of receipt and agreement to the terms of the credit card agreement and disclosures.

You grant us a security interest in all individual and joint share and/or deposit accounts you have with us now and in the future to secure what you owe under the Agreement and if you have applied for a credit card, under the credit card agreement. When you are in default, you authorize us to apply the balance in these accounts to any amounts due. Shares and deposits in an Individual Retirement Account, and any other account that would lose special tax treatment under state or federal law if given as security, are not subject to the security interest you have given in your shares and deposits.

OHIO RESIDENTS ONLY: The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.

WISCONSIN RESIDENTS ONLY: No provision of any marital property agreement, unilateral statement under Section 766.59, or court decree under Section 766.70 will adversely affect the rights of the Credit Union unless the Credit Union is furnished a copy of the agreement, statement or decree, or has actual knowledge of its terms, before the credit is granted or the account is opened.

UNDER PENALTIES OF PERJURY, I CERTIFY THAT:

1. The number I have provided is my correct taxpayer identification number, and
2. I am NOT subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. person (including U.S. resident alien); and
4. I am exempt from FATCA reporting.

Certification instructions: You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.

The IRS does not require your consent to any provision of this document other than certifications to avoid backup withholding.

Member Signature: _____

Date: _____

Joint Member Signature _____

Date: _____