

E-SERVICES

Digital Banking

Access your Financial Plus account from any PC mobile phone, or tablet with Internet access. Digital Banking allows you to:

- Get account balances (savings, loans, and Visa).
- Obtain savings, loan, and Visa history.
- Transfer funds within your account, including advances from Visa and line-of-credit loans.
- Transfer funds to another Financial Plus account.
- Make loan and Visa payments.
- Obtain detailed loan information including payment amount and due date.
- Download information on financial programs such as MSMoney, Quicken WebConnect, QuickBooks*
- View, print, and save copies of your cancelled checks.

*Not available on Mobile Banking application

Automated Phone Banking

Using your account number and Personal Access Code we provide, you can access your Financial Plus account from any phone. Automated Phone Banking will guide you through getting account information and performing many transactions. You can access Automated Phone Banking toll free at (800) 234-5884.

Combined Transaction Limits for Digital Banking and Automated Phone Banking

- \$10,000 limit per transaction, and
- Maximum of six (6) transactions per day, and
- Combined Digital Banking and Automated Banking Transactions not to exceed \$25,000 per day.

Technology Requirements for Accessing and Retaining eDocuments (Electronic Statements), Disclosures, and Alert Preferences (Electronic Alerts)

In order to receive statements, disclosures, and/or notices electronically, you must have a personal computer (PC) with Internet access, maintain an email address, have access to a printer or have available storage space on your PC to retain a copy on file, and the following software:

- Adobe Acrobat Reader 10 or higher (available free at <http://www.adobe.com>), and
- Microsoft Internet Explorer 9 or higher (128 bit encrypted), or
- Google Chrome version 10 or higher (128 bit encrypted), or
- Mozilla Firefox version 4 or higher (128 bit encrypted).

ELECTRONIC ACCESS AGREEMENT (continued)

Digital Banking: If I have requested access to Digital Banking transactions by checking the appropriate box on Page 1 of this document, by signing this Electronic Access Agreement, I hereby request access to Financial Plus Credit Union's (Credit Union) Digital Banking service. I have indicated my account number at the Credit Union that I wish to access. I have further indicated account(s) at the Credit Union that I wish to have "deposit/payment only" access through Digital Banking. I authorize the Credit Union to issue an Online User ID and password to me that will allow access to my account(s). I agree to keep my Online User ID and password private and secure and to notify the Credit Union immediately upon discovering that my information has been lost, stolen or that someone else may have obtained the information without my permission. In the event that I give my information to someone else, I agree to be responsible for all transactions performed by that person until I notify the Credit Union that they are no longer authorized. If my Digital Banking account is inactive for 15 months, I understand it is my responsibility to contact the Credit Union to restore my password to regain access to this service.

Automated Phone Banking: By signing the attached Electronic Access Agreement, I hereby request access to Financial Plus Credit Union's (Credit Union) Automated Phone Banking telephone audio response program. I have indicated my account number at the Credit Union that I wish to access. I have further indicated account(s) at the Credit Union that I wish to have "deposit/payment only" access through both Automated Phone Banking and Online Banking. I authorize the Credit Union to issue a Personal Access Code to me that will allow access to my account(s) using Automated Phone Banking. I agree to keep my Personal Access Code private and secure; and to notify the Credit Union immediately upon discovering that my Personal Access Code has been lost, stolen or that someone else may have learned the Personal Access Code without my permission. In the event that I give my Personal Access Code to someone else, I agree to be responsible for all transactions performed by that person until I notify the Credit Union that they are no longer authorized.

Electronic Communication: If I have requested access to eDocuments by checking the appropriate box on page 1 of this document, by signing this Electronic Access Agreement, I hereby request and agree to receive my Financial Plus Credit Union (Credit Union) statement and all other notices from the credit union by way of electronic delivery. Specifically, I agree to receive any disclosures to which I am entitled under federal Regulations B (Equal Credit Opportunity Act), E (Electronic Fund Transfers Act), M (Consumer Leasing Act), Z (Truth in Lending Act), and CC (Expedited Funds Availability Act); the NCUA Truth in Savings Regulation; the federal Fair Credit Reporting Act; the Michigan Electronic Funds Transfers Act; the Uniform Commercial Code; the National Automated Clearinghouse Association Rules; and my Account Agreement with Financial Plus Credit Union, including but not necessarily limited to my monthly credit union account statement, at the e-mail address I have provided on Page 1 of this document. I understand and acknowledge that I presently have the right to receive such disclosures in paper form, and that I may revoke this authorization and agreement at any time by providing the Credit Union with written notice of such revocation, at which time I will again be entitled to receive such disclosures in paper form. Whether I send such notice of revocation by paper or electronic means, the effective date of my revocation of this agreement will be no more than 30 days from the day such notice is acknowledged as received by the Credit Union. I have read and understand the Technology Requirements for Accessing and Retaining Electronic Statements, Disclosures and Notices listed above, and hereby acknowledge that my equipment meets those technical requirements for receiving, downloading, and printing the information. I understand that in the event I experience difficulties or have questions regarding electronic disclosures I can contact the Credit Union at 800-748-0451. I understand that I must notify the Credit Union if my e-mail address changes by providing the Credit Union with written or electronic notice of any such change in address, and that the effective date of this new e-mail address will be no more than 30 days from the day such notice is acknowledged as received by the Credit Union. I hereby hold the Credit Union harmless in the event that I have not received any required statement or other notice as a result of my failure to notify the credit union of a change in my e-mail address. I understand and agree that even though I have agreed to receive disclosures electronically, I may contact the Credit Union by e-mail or telephone to request that the Credit Union send a paper copy of a disclosure that has already been sent electronically, and that the Credit Union may charge a fee for that service, which fee will be separately disclosed. I agree that such fee can be deducted by the Credit Union from any account at I own at the credit union.



E-SERVICES

To register for Digital Banking(which includes Mobile Banking) and/or Automated Phone Banking and/or eDocuments (Electronic Statements)/ Alert Preferences (Electronic Notices), complete the entire Electronic Access Agreement form below and sign it. Return this form to one of our offices or mail it to: Financial Plus Credit Union, PO Box 7006, Flint, MI 58507

Electronic Access Agreement

Name _____ Membership Account # _____ Soc. Sec. # (last 4 digits) XXX-XX-_____

Update

Address _____ City _____ State _____ Zip Code _____

Home Telephone # _____ Cellphone # _____ Daytime Telephone # _____

Update

E-mail Address _____

Please print clearly

Name(s) of individual(s) authorized to access and make transactions using the services indicated below _____

IMPORTANT NOTICE — The individual(s) you authorize above to have access to the services listed below will have access to your entire Membership Account Number including: 1.) ALL share and loan balance and account history, and 2.) the ability to transfer funds and perform transactions. The individual(s) must currently be joint on at least one share or loan for the Membership Account # listed above.

I hereby request access to the E-Services indicated below:

Add

☐ Digital Banking

Add

☐ eDocuments

☐ Automated Phone Banking

☐ Alert Preferences

Authorize Transfers to another Financial Plus Account

☐ For Automated Phone Banking and Digital Banking (I/we) authorize "deposit and payment only" transfers to the following accounts:

Account # _____ Name _____

Account # _____ Name _____

This option allows transfers (deposits and payments only) to another Financial Plus account.

Account # _____ Name _____

By signing below I acknowledge that I have received a copy of the Membership and Account Agreement (Agreement), which includes, among other things: terms and conditions regarding Automated Phone Banking and Digital Banking (including Mobile Banking) Transactions; that I have read, understand, and agree to the terms and conditions of the agreement(s) and disclosure(s) for the services that I have selected above and all other account and loan terms previously disclosed; and that all information contained in this agreement is true and accurate as of the date signed. The statements and agreements, which I have made in this agreement, are binding upon all owners of any account under the Membership Account Number listed above, and other person(s) who are authorized by any account owner to access this Membership Account through Automated Phone Banking and Digital Banking. I agree that any losses incurred by the Credit Union as a result of providing this service will be the responsibility of all account owners regardless of whether performed by me, another account owner, or others that have been authorized by an account owner.

I understand and agree that the Credit Union retains the right, to the extent permitted by law, to amend this agreement in the future by providing me with written notice of changes sent to my last known mailing address or by providing electronic notice of such changes sent to my last known email address if I have elected the Alert Preferences service. I understand the Credit Union may discontinue all or some of its Electronic Access Services by providing notice to me of the discontinuation. I acknowledge and understand that my privilege to use any or all of these services may be revoked if at any time I am in violation of the terms and conditions set forth in this Agreement or any other agreement I have with the Credit Union.

[Note: this Agreement continues on next page. Do not sign before reviewing the entire Agreement.]

Signature _____ Date _____

Must be signed by primary account holder

rev. 06/20

For Credit Union Use Only

(Use Teller ID)

Digital Banking

Create Password/Clear Date _____

X-fer Records Maintenance _____

Disclosure _____

Automated Phone Banking

Access Code _____

X-fer Records Maintenance _____

Disclosure _____

Verify Signature _____

Update Phone _____

Update E-Mail _____

Update Address _____