

Phone First Account Change Form

Full Name: _____ Date: _____

Daytime Phone: _____ Social Security Number (required): _____

User ID (normally the account you enrolled with): _____

Please indicate the desired changes to your account on Phone First . In the first column, indicate whether the account is to be added, changed, or deleted. In the second column, list the account number. In the third column, circle the desired access type.

[***Inquiry Only***= Account Balances only ***Inquiry & Transfer***= Account Balances & Transfers]

Circle One	Account Number	Access Type
Add Change Delete		Inquiry Only Inquiry & Transfer
Add Change Delete		Inquiry Only Inquiry & Transfer
Add Change Delete		Inquiry Only Inquiry & Transfer
Add Change Delete		Inquiry Only Inquiry & Transfer
Add Change Delete		Inquiry Only Inquiry & Transfer
Add Change Delete		Inquiry Only Inquiry & Transfer
Add Change Delete		Inquiry Only Inquiry & Transfer
Add Change Delete		Inquiry Only Inquiry & Transfer
Add Change Delete		Inquiry Only Inquiry & Transfer
Add Change Delete		Inquiry Only Inquiry & Transfer
Add Change Delete		Inquiry Only Inquiry & Transfer
Add Change Delete		Inquiry Only Inquiry & Transfer
Add Change Delete		Inquiry Only Inquiry & Transfer
Add Change Delete		Inquiry Only Inquiry & Transfer
Add Change Delete		Inquiry Only Inquiry & Transfer

I authorize First National Bank of Newtown to implement the changes indicated above. FNB is not liable for any errors or losses that may result from the unauthorized use of my accounts. I agree to indemnify and hold FNB harmless from any and all claims, liability, damages and losses (including attorney's fees and court costs) arising out of or in connection with the unauthorized use of my accounts.

In order to authorize these changes, signatures of the authorized signers of all listed accounts must appear below.

Signature: _____ **Print Name:** _____

Signature: _____ **Print Name:** _____

Signature: _____ **Print Name:** _____

Signature: _____ **Print Name:** _____

Signature: _____ **Print Name:** _____

Signature: _____ **Print Name:** _____

For Bank Use Only: Branch: _____ Employee: _____

Date Rec'd: _____ Date Entered: _____ Date Verified: _____