

## STATETRUST Bank & Trust Ltd.

New
Maintenance

## **Debit Card Request**

Main Customer Numb	er': Portfolio Number': Porti	folio Name :	Date Received:	
			mm dd yyyy	
agree to the terms of this a & Trust, Ltd, its affiliated b	agreement by signing in the Signature section	ist Bank & Trust, Ltd. Debit Card. This agreement below. As used in this agreement, the words C, and their successors, and assigns, and their er and Portfolio Holder signatory.	"Bank," "we" and "us" mean StateTrust Ban	
Product Inform	nation			
Product Type	☑ Debit Card			
Issue Type	☐ New ☐ Additional ☐ R	eplacement	☐ Individual ☐ Corporate	
Reason for Issue	☐ New ☐ Lost/Stolen ☐ Damag	e	lain:	
Account assignment Assigned by Bank	For security reasons, a special Money Market account within the portfolio held with the Bank is opened for debit cards with an initial funding of up to US\$3,000. Client can, under its own risk, transfer a higher amount by doing so directly through e-Banking.			
Portfolio assignment Assigned by Bank	The special Money Market account for debit card will be created in the main portfolio of the portfolio holder signatory held with the Bank, or if it is required, in a specially designated portfolio and at the sole discretion of the Bank, to allow the cardholders have e-Banking access for Debit Card Inquiry			
Countries of Usage	☑ USA			
	☐ Country of Residence		to request other Countries of Usage.	
	ormation (Person using the Card			
Card Holder Information	Last Name	First Name	Middle Name	
	Address:		Customer Number:	
	City:	State:	Country:	
	Home Phone:	Work Phone:	hone: Mobil Phone:	
	Date of Birth(m/d/y): / / Country of Birth: Country of Residence:			
	E-Mail:			
Name as it would appear on Card	Card Name must be consistent with the legal	name as it appears on the documentation ID pro	ovided. Maximum of 24 chars allowed.	
Cardholder Relationship to Main Customer	Spouse Son/Daughter Father/Mother Brother/Sister Aunt/Uncle Friend Other, Explain:			
Documentation Included	☐ Copy of Passport ☐ Copy of Cédula ☐ Copy of Drivers' License			
Cardholder Signature	Ву:			
Signature	Full Name:	Date(M	DY):	
<b>Portfolio Autho</b>	orized Signatures			
linked under the selected Portfi any expenses sustained or inct and the Jurisdiction Section (Si Debit Card Request and conditi Disclaimer of Risk and Liabil theft, cloning or any other fo	olio and to indemnify and nold harmless StateTrust Bank urred as a result of any Debit Card transaction. Approval sction 1) of the Universal Account Agreement executed by ions of collateral, shall govern the terms of this Agreemen lity: Debit Cards issued by StateTrust Bank & Trust, I	Debit Card to the Card Holder in reference and to allow this Trust Ltd., its affiliates and employees from and against a signatures must be come from authorized registered Portfoly you at the time your portfolio account was opened, as well t.  Ltd. are not covered by insurance or money back guaraeater amount, we suggest that you keep an available be	ny and all claims, liabilities, damages, charges and lio signers. I/We further agree that the Governing Law I as any other provisions therein applicable to this antees against loss for unauthorized charges,	
Ву:		Ву:		
Full Na		Full Name <sup>2</sup> :  Date (MDY):		
	Sin	nature Verification  □ Bv:		