Account Agreement

Institution Name & Address Poppy Bank Petaluma Office 100 Second St. Petaluma, CA 94952 (707) 636-9030 Owner/Signer Information 1 Bobby Brown Relationship Owners Address 123 Happy Dr, Petaluma, CA 94952 Mailing Address PO Box 123, Petaluma CA 94954 Gov't Issued Photo ID 10/07/2017 **Drivers License** Issued: (type, number, state, D234354 CA Expires: 10/18/2022 issue date, exp. date) Other ID Credit Card (description, details) Visa Expires: 02/28/2023 Employer Poppy Bank, New Accounts/CSR-Poppy Bank Previous Financial Inst diaz1234@gmail.com E-Mail Work Phone Home Phone: (707) 778-7756 Mobile Phone: (123) 456-7890 Birth Date: 10/18/1991 SSN/TIN: 123-34-2134 Ownership of Account The specified ownership will remain the same for all accounts.

| ш | individual |
|---|---|
| | Joint Account |
| | Joint - Spouses (With right of survivorship) |
| | Community Property (Spouses) |
| | Tenancy in Common |
| | |
| | Sole Proprietorship or Single Member LLC Partnership |
| | Sole Proprietorship or Single Member LLC Partnership LLC-enter tax classification (C Corp S Corp Partnership) |
| | |
| | LLC-enter tax classification (C Corp S Corp Partnership) |

| | Totten Trust | Pay-On-Death (POD) | | | | |
|-----|--|----------------------|--|--|--|--|
| | | | | | | |
| Be | neficiary Name(s), Addı | ress(es), and SSN(s) | | | | |
| (Ch | (Check appropriate beneficiary designation above.) | | | | | |
| | | | | | | |
| | | | | | | |

| Internal Use 111 | Officer |
|--|---------|
| Account Title & Address | |
| Oakmont Management Group Agent FBO Varenan 123 Main St Santa Rosa, CA 94949 | |

Date: 11/21/2020

| Enter Non-Individual Owner Information on page 2. There is additiona |
|--|
| Owner/Signer Information space on page 2. |
| ☐ If checked, this is a temporary account agreement. |

Number of signatures required for withdrawal: _

Signature(s)

Signer designation(s).)

The undersigned authorize the financial institution to investigate credit and employment history and obtain reports from consumer reporting agency(ies) on them as individuals. Except as otherwise provided by law or other documents, each of the undersigned is authorized to make withdrawals from the account(s), provided the required number of signatures indicated above is satisfied. The undersigned personally and as, or on behalf of, the account owner(s) agree to the terms of, and acknowledge receipt of copy(ies) of, this document and the following:

| X | Terms & Conditions | Truth in Savings | X | Funds Availability |
|---|---------------------------|---------------------|------|--------------------|
| X | Electronic Fund Transfers | X Privacy | X | Substitute Checks |
| | Common Features | | | |
| X | Authorized Signer (See Ov | vner/Signer Informa | tion | for Authorized |

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

| (1): | x | | | |] |
|------|------------|------------------------------|--------|------------|---|
| | I.D. # | Bobby Brown 123-34-2134 | D.O.B | 10/18/1991 | |
| (2): | x | James Brown | | |] |
| | I.D. # | 123-34-2134 | D.O.B | 10/18/1991 | |
| (3): | x | | | |] |
| | I.D. # | Jimmy Neutron 123-34-2134 | D.O.B | 10/18/1991 | |
| (4): | [× | Timmy Turner | | 40/49/4004 |] |
| | I.D. # | 123-34-2134 | D.O.B. | 10/18/1991 | |

Beneficiary Designation

(Check appropriate ownership above.)

| | | | Non-Individual Owner Information | | | | |
|--|---|--|---|---|---|--|--|
| Name | Signer Information 2 Non-Individual Owner Information James Brown Name Oakmont Management Group Age | | | Group Agent | | | |
| Relationship | Owners | | State/Country & Date | | | | |
| Address 123 Hanny Dr. F | | taluma, CA 94952 | of Organization | | | | |
| | 120 (14pp) 21, 1 0 | tarama, er to reez | Nature of Business | | | | |
| Mailing Address (if different) | PO Box 123, Peta | luma CA 94954 | | | | | |
| Gov't Issued Photo ID | Data and Linear and | 40/07/0047 | Address | | | | |
| (type, number, state, | Drivers License D234354 CA | Issued: 10/07/2017 Expires: 10/18/2022 | Mailing Address | | | | |
| Other ID | Credit Card | EXPIRES. 16/10/2022 | (if different) | | | | |
| (description, details) | Visa | Expires: 02/28/2023 | Authorization/ | | | | |
| Employer | Poppy Bank, New | Accounts/CSR-Poppy Bank | Resolution Date Previous Financial Inst. | | | | |
| Previous Financial Inst. | | | E-Mail | | | | |
| E-Mail | diaz1234@gmail.d | com | Phone | | | | |
| Work Phone | (707) 778-7756 | | EIN: 82-11111 | Mobile Pho | Mobile Phone: | | |
| Home Phone: (707 | 7) 778-7756 | Mobile Phone: (123) 456-7890 | Account Descr | ription Account # | Initial Deposit/Source | | |
| Birth Date: 10/18/ | 1991 | SSN/TIN: 123-34-2134 | | | \$ | | |
| Owner/Signer | Information 3 | | 111 | 111 | Cash Check | | |
| Name | Jimmy Neutron | | | | | | |
| Relationship | Owners | | | | \$ | | |
| Address | 123 Happy Dr, Pet | taluma, CA 94952 | | | Cash Check | | |
| Mailian Addass | | | _ | | | | |
| Mailing Address (if different) | PO Box 123, Peta | luma CA 94954 | | | | | |
| Gov't Issued Photo ID | Drivers License | Issued: 10/07/2017 | | | \$ | | |
| (type, number, state, | D234354 CA | Expires: 10/18/2022 | | | Cash Check | | |
| Other ID Credit Card | | | | | <u> </u> | | |
| (description, details) | Visa | Expires: 02/28/2023 | Services Requ | iested | | | |
| Employer | Poppy Bank, New | Accounts/CSR-Poppy Bank | ☐ ATM ☐ I | Debit/Check Cards (No. Re | equested:) | | |
| Previous Financial Inst. | | | │ | | | | |
| E-Mail | diaz1234@gmail.d | com | | | | | |
| Work Phone | (707) 778-7756 | | Backup Withh | olding Certifications | | | |
| | 7) 778-7756 | Mobile Phone: (123) 456-7890 | (If not a "U.S. Person", | on", certify foreign status separately) | | | |
| Birth Date: 10/18/ | | ssn/tin: 123-34-2134 | | re field (1) on this document, I certi | | | |
| Owner/Signer | Information 4 | | the statements made in defined in the instructio | | a U.S. citizen or other U.S. person (as | | |
| Name | Timmy Turner | | | Number - TIN: <u>12-34567</u> | 6 | | |
| Relationship | Owners | | The Taxpayer Identifica | tion Number (TIN) shown is my cor | rect taxpayer identification number. | | |
| Address | 123 Happy Dr, Pet | taluma, CA 94952 | ☐ Backup Withh | nolding. I am not subject to back | up withholding either because I have | | |
| Mailing Address | | | not been notified that I | am subject to backup withholding a | as a result of a failure to report all otified me that I am no longer subject to | | |
| (if different) | PO Box 123, Peta | luma CA 94954 | backup withholding. | the internal nevenue Service has h | otilieu ilie tilat i alli ilo lollyel subject to | | |
| Gov't Issued Photo ID | Drivers License | oients. I am an exempt recipient u | nder the Internal Revenue Service | | | | |
| (type, number, state, issue date, exp. date) D234354 CA | | Issued: 10/07/2017 Expires: 10/18/2022 | Regulations. Exempt pa | yee code (if any) | | | |
| Other ID | Credit Card | , | | | if any) indicating that I am exempt from | | |
| (description, details) | Visa | Expires: 02/28/2023 | FATCA reporting is corr Other Terms/I | | | | |
| Employer | Poppy Bank, New | Accounts/CSR-Poppy Bank | Other Terms/I | monnadon | | | |
| Previous Financial Inst. | | | | | | | |
| E-Mail diaz1234@gmail | | com | | | | | |
| Work Phone | (707) 778-7756 | <u> </u> | _ | | | | |
| | 7) 778-7756 | Mobile Phone: (123) 456-7890 | _ | | | | |
| Birth Date: 10/18/ | | ssn/tin: 123-34-2134 | | | | | |
| obtain sufficient in several questions fulfill this requirem | nformation to verify and to provide one nent. In some instan nation. The informa | ion. Federal law requires us to your identity. You may be asked or more forms of identification to noes we may use outside sources tion you provide is protected by ou | | | | | |

Signature Card-CA Bankers Systems TM VMP® Wolters Kluwer Financial Services © 2015 Doc #10481