

**CENTRAL BANK OF KANSAS CITY  
CASH MANAGEMENT ENROLLMENT FORM**

**COMPANY INFORMATION**

<b>COMPANY</b>			
<b>ADDRESS</b>			<b>TIN/SSN</b>
<b>CITY</b>	<b>STATE</b>		<b>ZIP</b>
<b>PHONE</b>	<b>ADMINISTRATOR FOR ACCOUNT(S)</b>		
<b>ADMINISTRATOR'S EMAIL</b>			

**ACCOUNT INFORMATION**

<b>Account #</b>	<b>Name on the Account</b>	<b>Type of Account</b>
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Account Types:                          Checking, Savings, Money Market, Loans, Certificates of Deposit, IRA'S

**USER INFORMATION**

<b>Name of User</b>	<b>Access</b>		
1.	<b>Inquiry</b>	<b>Transfers</b>	<b>Stop Pays</b>
2.	<b>Inquiry</b>	<b>Transfers</b>	<b>Stop Pays</b>
3.	<b>Inquiry</b>	<b>Transfers</b>	<b>Stop Pays</b>
4.	<b>Inquiry</b>	<b>Transfers</b>	<b>Stop Pays</b>
5.	<b>Inquiry</b>	<b>Transfers</b>	<b>Stop Pays</b>

The Administrator has full rights on all functions. Also, the administrator is responsible for entering all levels of authority for each employee who is granted access.

Wire Transfer and ACH Origination are available at THE BANK'S discretion. For more information contact an online banking representative.

<b>Cash Management Fees:</b>	<b>Monthly Access Fee-Basic Services</b>	FREE
	<b>Transfer Fee</b>	FREE
	<b>Stop Payment Fee</b>	\$30.00
	<b>Bill Pay</b>	\$4.95

**Signatures:** By signing below, I hereby authorize THE BANK to issue temporary passwords for my account(s) and users which must be changed upon first entry into the system. Any changes to users and/or access must be in writing to THE BANK. Changing signatures cards and resolutions does not change your internet banking agreement. An authorized signer on the account must sign this enrollment form and any subsequent changes to this form.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

After completion fax this form to 816-483-2586.