Business Express Enrollment Form						
Business Name				Company Tax ID Number		
Primary Contact/Administrator (Name and Title)				Primary Email Address		
The series of th						
Direct Phone Number for Primary Contact (This number may be needed for the Administrator to login to Business Express and will need to be a number where they can always be reached)						
Address (PO Box not acceptable)						
City State			e	Zip Code		
Company Phone Nu			Fax Number			
Business Express Options (All plans require a Peoples National Bank Business Checking Account.)						
Small Business View account information; Make internal transfers; Make stop payments; Pay bills				Free		
	ernal transfers; Make stop payment ax Payments & Repetitive & Non-F		\$35 per month			
Business Express Account Details						
Balance Reporting & Transactional Information In order to use Business Express, you must have a Peoples Checking Account. Enter in the accounts you want to view and an account description which best describes the function of each account. If you wish to view loan information, include your loan account number.						
	A/C/D*	Peoples Account Number	er Account I	Description	Bill Pay	Transfer Capability Requested (if applicable)
Example	Add	0123456789	Payroll	Checking	☐ Yes ☐ No	☐ Yes ☐ No
Account 1					☐ Yes ☐ No	☐ Yes ☐ No
Account 2					Yes No	☐ Yes ☐ No
Account 3					☐ Yes ☐ No	☐ Yes ☐ No
Account 4**					☐ Yes ☐ No	☐ Yes ☐ No
Account 5**					☐ Yes ☐ No	☐ Yes ☐ No
*A=Add C=Change D=Delete Customer Authorization By signing below, the Customer states that they have reviewed and understand the Business Express Enrollment and the applicable terms and conditions for all the features they have selected as						
found in the Business Express Service Agreement. Customers using the ACH Service agree that International ACH Entries will not be initiated. The Company represents and warrants that the individual signing below has the all requisite authority to sign on behalf of the Company and that upon signing this Enrollment; the entire Business Express Agreement shall be a binding obligation of the Company. The authorized signor(s) acknowledge receipt of the Agreement and accept and agree to all the terms and conditions stated therein.						
Customer Name (Ple		Date	Customer Name (Please Print D		Date	
By: Owner/Authorized Signor Title By: Owner/Authorized Signor						Title
Please return to your branch office, fax to 618-241-6513, or mail to Peoples National Bank, attn: Business Express, P.O. Box 908, Mt. Vernon, IL 62864 Bank Use Only						
Officer Name				☐ Direct I	Bill Ana	lysis