



Charity Selection Form

Charity Name: _____
 Address: _____
 City, State Zip: _____
 Telephone Number: _____
 Charity EIN: _____
 Customer Name: _____
 Telephone Number: _____
 Bank For A Cause Account No.: _____

**Open your account today at
www.BankForACause.com**

Once your account is opened, complete this form and return to Liberty Savings Bank using one of the following methods:

- Return to a local Liberty Savings Bank Financial Center
- Mail it to Liberty Savings Bank, Attn: Customer Information Dept., P.O. Box 1000, Wilmington, OH 45177
- Scan and email to web-services@libertysavingsbank.com
- Fax to 937.382.7174

Make a difference for your charity today!

By simply opening a free Bank for a Cause Checking account and meeting the following criteria of that account every month, Liberty will contribute 1% of your total monthly debit card purchases to your 501(c)3 charity of choice:

- Make signature-based, credit purchases using your MasterCard® Debit Card
- Maintain enrollment in eStatements
- Have one direct deposit or three bill payments using Liberty's free Online Bill Pay service



To save time when opening your account, gather the information listed below prior to account opening. Then, open your account online at www.BankForACause.com or visit your local Liberty Savings Bank Financial Center.

Primary Account Holder Joint Account Holder

First Name		
Middle Initial		
Last Name		
Street Address, Apt. #		
City, State, Zip		
SSN		
Home Phone		
Mobile Phone		
Employer & Work Phone		
Birthdate		
Driver's License #		
Issue Date		
Expiration Date		
Email Address		
Mother's Maiden Name		

For data gathering purposes only. Do not return with Charity Selection form.