Consumer Deposit Account

Relationship Change Application



Host Status:		
Host Update Successful		
Banker Name:	Officer/Portfolio Number:	Date:
BRANDI R.GOELLNER	E5993	11/05/2019

 Banker Phone:
 Branch Number:
 Banker AU:
 Banker MAC:

 972/347-5028
 08026
 0068535
 T9031-010

To help the government fight the funding of terrorism and money laundering identifies each person (individuals and businesses) who opens an account. Wo other information that will allow us to identify you. We may also ask to see yo	hat this means for you: W	hen you oper	an account, w		
Account Information					
Product Name:	Minor:	COID:	Product:	Account Number:	
Wells Fargo Everyday Checking		808	DDA	6932	
Related Customers					
Customer 1 Name:	Custome	Customer Number (ECN): Account Relationship Status:			
ASHLEY SHAVERS		3414 CHANGED		CHANGED	
Current Account Relationship:	NEW Acc	NEW Account Relationship:			
Sole Owner	Prim	Primary Joint Owner (or)			
Customer 2 Name:	Custome	Customer Number (ECN): Account Relationship Status:			
TRENDON T SHAVERS		9419 NEW			
Current Account Relationship:	NEW Acc	NEW Account Relationship:			
None	Seco	Secondary Joint Owner (or)			
Checking/Savings Statement Mailing Information					
Customer(s) Listed on Statement:	Stateme	Statement Mailing Address:			
ASHLEY SHAVERS					
TRENDON T SHAVERS					
1					
L					



Customer 1 Information Customer Name: Street Address: ASHLEY SHAVERS Account Relationship: |Primary Joint Owner (or) axpaver Identification Number (TIN): TIN Type: Date of Birth: 1421 SSN Primary ID Type: Primary ID Description: (Document when no physical residence, business or alternate street address.) Secondary ID State/Country: Secondary ID Issue Date: Secondary ID Expiration Date: Check Reporting: Home Phone: **Business Phone:** NO RESPONSE Country of Citizenship: US **Customer 2 Information** Customer Name: Street Address: TRENDON T SHAVERS Account Relationship: |Secondary Joint Owner (or) Taxpayer Identification Number (TIN): TIN Type: Date of Birth: SSN Primary ID Type: Primary ID Description:

Joint Account with Right of Survivorship

The persons signing this section hereby agree with each other and the bank that this account is a joint account with right of survivorship, and that on the death of one party to a joint account, all sums in the account on the date of death vest in and belong to the surviving party as his or her separate property and estate. Each person signing this section who is married to a person who is not also signing this section represents and warrants that no funds now or hereafter deposited to the account, nor any interest earned on such funds, are subject to the management, control or disposition (jointly or otherwise) of such person's spouse.



NO RECORD

Country of Citizenship:

US

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Customer 1 Name ASHLEY SHAVERS	Customer Number (FCNI)-	
Customer 1 Signature		
ashly Thewers		Date: 11/05/2019
Customer 2 Name		
TRENDON T SHAVERS		
Customer 2 Signature		
TRANSON TRANSPORTS	Submit manually	D :
Internal	Signature not required	Date:
		11/05/2019
Customer Signatures - New/Remaining Account Ov	-	
Everything I have stated in this application is correct. You are authorized to mainclude ordering a credit report or other report (i.e. information from any motor agreement and privacy brochure and agree to be bound by them. I also agraement Service Agreement and Product Guide. Under this parbitration proceeding and not by a jury trial or a trial before a	or vehicle department or other state ager see to the terms of the dispute re program our disputes will be dec	ncy) on me. I have received a copy of the applicable account solution program described in the account
New/Remaining Customer 1 Name	Customer Number (FCN):	
ASHLEY SHAVERS	B 4	14
New/Remaining Customer 1 Signature		
The Showers	Submit manually Signature not required	Date: 11/05/2019
New/Remaining Customer 2 Name TRENDON T SHAVERS	Customer Number (ECN):	: 19
New/Remaining Customer 2 Signature		
TRENCON TO HAVE'S	Submit manually	Date:

Signature not required

11/05/2019