

**RBO
DEPOSIT AGREEMENT APPLICATION**

No. _____ Tax ID No. _____

Name _____

Mailing Address _____
Address City State Zip code

President _____

Secretary _____

Telephone # _____ Fax: _____

Amount of Initial Deposit _____

Signature of President _____ Date _____

Signature of Secretary _____ Date _____

Thank you for your interest in starting a Deposit Agreement with the RBO.

In order to establish your Deposit Agreement, it will be necessary for you to complete and return the application with your initial deposit. ***We would like the opportunity to present our products and benefits to your members.*** An envelope is provided for your use. Upon receipt of the application and initial deposit, we will prepare your Deposit Agreement certificate.

If you have any further questions, please do not hesitate to contact our office.

Fraternally,

Heather M. Bradley
Corporate Secretary