

# PASSWORD PROTECTION FORM

Please fill out the form below. Use 8 to 30 characters. You may use a word or phrase. Often times, it is suggested that you incorporate numbers and letters. Please remember to always provide us with your correct password. Presenting us with an incorrect password will deny you the information you want and puts us on alert that someone else may be trying to access your information.

If you need any help in filling out this form, please bring it to the bank and we will be happy to assist you.

Please print and be sure to sign.

NAME \_\_\_\_\_

PASSWORD OR PHRASE

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(use one character per dash up to 30 including spaces)

SIGNATURE \_\_\_\_\_

NAME \_\_\_\_\_

PASSWORD OR PHRASE

-----  
(use one character per dash up to 30 including spaces)

SIGNATURE \_\_\_\_\_

**Thank you for your participation in helping us to protect  
your financial assets!**

**To learn more about Identity Theft, go to our bank website  
[www.csb4me.com](http://www.csb4me.com)**

***City State Bank***

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438-6621

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