



Email Statement Request Form

Customer Name _____

Business Name _____

SS# / TIN# _____

Email Address _____

Mailing Address _____

City _____ State _____ Zip code _____

Phone _____

Account(s) to be activated for Email Statements

Account Number _____ Type (check one) checking savings

Account Number _____ Type (check one) checking savings

Account Number _____ Type (check one) checking savings

What password would you like to use? _____ (must be **UNIQUE** 4-8 characters)

Do you want your paper statement discontinued? Yes No

Signature

Date

Please bring your completed form to your favorite Heartland Bank office or mail it to:

Heartland Bank and Trust Company
ATTN: Dan Cottone
PO Box 67
Bloomington, IL 61702-0067

Questions? Call us toll-free at 888-897-2276. *We're here for you!*