

## ELECTRONIC DISCLOSURES AND NOTICES WITHDRAWAL OF CONSENT AGREEMENT

Date	
Name/Address of Financial Institution	First Mutual Bank, FSB 605 Washington Blvd. Belpre, Ohio 45714 740-423-9504

## ACCOUNT INFORMATION

Account Number	
E-Mail Address	

**DEFINITIONS:** In the provisions hereof, the terms "you" and "your" refer to the consumer, and the terms "we" and "us" refer to the financial institution ("Institution") listed above. Also, the use of "you" and "your" shall be construed in the singular and plural, as the text requires.

WITHDRAWAL OF CONSENT. Any authorized signer for the account(s) listed above has the right to withdraw at any time the consent to have records provided in electronic form. Your withdrawal of consent will not be effective until we receive it and have had a reasonable opportunity to act upon it.

**CONSEQUENCE OF WITHDRAWAL.** Subsequent to the acceptance of the Withdrawal of Consent by this Institution, any further records will be sent to you at the address on record for the account(s). A withdrawal of your consent is not retrospective and does not affect the legality, validity or enforceability of any agreements, transactions, or electronic records provided, received or made available before we have had a reasonable opportunity to act upon your withdrawal of consent.

ACKNOWLEDGMENT. By signing this Withdrawal of Consent, you acknowledge that you have read and understood the above provisions, and hereby withdraw your consent for the use of electronic delivery of records on the above listed account(s) on this date.

Signature

Signature

Date

Date