

ACCOUNT NAME:	CLIENT NO:
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By signing below, I/we confirm that I/we have received a copy of the Terms and Conditions governing this account and have fully understood and agreed to be governed by the provisions thereof, including but not limited to, the survivorship agreement authorizing First Metro Investment Corporation (FMIC) to release the balance of an "OR" account to the surviving depositor/s in the event of death of one depositor; the conditions under which FMIC and its subsidiary/affiliate to share/disclose information/data pertaining to me/us; and the provision on the authority of FMIC to withhold and/or set off my/our FMIC deposits for any and all obligations with FMIC and any of its subsidiaries/affiliates.

By signing below, I/we confirm that we fully understand the corresponding risks involved in availing of such FMIC products, facilities or services. Further, my/our continuous use and/or availment of such products, facilities or services shall mean my/our conformity to any and all supplement(s), modification(s) or amendment(s) of such Terms and Conditions which maybe posted in conspicuous places within FMIC premises or which may be published in any other manner.

I/we also warrant that I/we are aware of the provisions of Republic Act No. 9160 (Anti Money Laundering Act of 2001) as amended, and I/we represent that my/our transactions herein are not among those violations under the said law and that all the funds to be deposited in the account(s) come from my/our legitimate undertakings. I/we authorize FMIC to make any such verifications or reports in compliance with RA No. 9160, as amended, as it may deem appropriate, for which acts I/we hold FMIC free and harmless from any and all liabilities, claims and/or damages. I/we also attest to the truth and correctness of my/our given personal/business information. In case I/we apply for any credit accommodation, I/we hereby authorize FMIC and its officers and staff to obtain and disclose information on my/our deposits and other properties whether within FMIC or with other banks.

IN WITNESS WHEREOF, I/we have affixed my/our signature(s) on _____ at _____.

Corporate Signatory 1
 Signature over Printed Name

Corporate Signatory 2
 Signature over Printed Name

Corporate Signatory 3
 Signature over Printed Name

Corporate Signatory 4
 Signature over Printed Name

Corporate Signatory 5
 Signature over Printed Name

Corporate Signatory 6
 Signature over Printed Name

IN CONNECTION WITH OUR MONEY MARKET AND OTHER TRANSACTION WITH YOU, PLEASE HONOR AND RECOGNIZE THE FOLLOWING SIGNATURES IN THE DISBURSEMENT OF OUR FUNDS AND PROCESSING OF OUR OTHER TRANSACTION WITH YOU. **(NOTE: USE ADDITIONAL SIGNATURE CARD IF MORE THAN SIX (6) SIGNATORIES)**

() ANY ONE PARTY			() ANY TWO PARTIES			() ALL PARTIES		
	NAME: (CORPORATE SIGNATORY 1)			NAME: (CORPORATE SIGNATORY 2)			NAME: (CORPORATE SIGNATORY 3)	
1.		1.			1.			
2.		2.			2.			
3.		3.			3.			
	NAME: (CORPORATE SIGNATORY 4)			NAME: (CORPORATE SIGNATORY 5)			NAME: (CORPORATE SIGNATORY 6)	
1.		1.			1.			
2.		2.			2.			
3.		3.			3.			

FMIC/MBTC Use ONLY

SIGNED IN THE PRESENCE OF/DATE: _____ SIGNATURE OVER PRINTED NAME OF WITNESSING FMIC/MBTC PERSONNEL	SIGNATURE AUTHENTICATED BY/DATE: _____ SIGNATURE OVER PRINTED NAME OF AUTHORIZED FMIC/MBTC OFFICER	APPROVED BY/DATE: _____ SIGNATURE OVER PRINTED NAME OF AUTHORIZED FMIC OFFICER
<input type="checkbox"/> NEW ACCOUNT DATE OPENED: (M/D/Y): _____	<input type="checkbox"/> UPDATING UPDATE NO _____ LAST UPDATE MADE ON _____ ACCOUNT ORIGINALLY OPENED ON _____	