Eastern TreasuryConnect® eStatement Enrollment Form

By completing and signing below you are hereby requesting Eastern Bank to add the eStatement service to the TreasuryConnect Customer ID noted below. You may bring this form to your local branch or fax to the Business Services Team at (781) 598-7697.

Company Name: _______________________________  TreasuryConnect Customer ID: ______
Company Admin Printed Name: _______________________
Company Admin Email Address: _______________________
Note: The Company Admin email address will be used for notification of statement availability

BY SIGNING BELOW, Customer (or Customer’s duly authorized agent, on Customer’s behalf) agrees to the terms in Section I. TreasuryConnect, subsection iii. Electronic Communications; Statements and Notices, of the existing Cash Management Terms and Conditions and requests that Eastern Bank make the changes requested on this form to the Customer’s Eastern TreasuryConnect Online Service.

Administrator Signature: ____________________________
Administrator Title: ________________________________
Today’s Date: __________________

For Bank Use Only: Fax to ETS 781-477-1333

Reviewed By (BST or Branch)  Date

Processed By (ETS)  Date

Reviewed by (ETS)  Date