



Email Notification Consent Form

By signing below, the undersigned represents their desire and consent to receive electronic notification that the monthly invoice is now available for downloading off of the CBS website. **NOTE: if this option is chosen, then (1) the undersigned must register on the website to view the statement and (2) no paper statement will be mailed.** The undersigned acknowledges that executing this form is optional, and has the right to withdraw this consent at any time by contacting Cooperative Business Services, LLC ("CBS") in writing. The undersigned acknowledges that CBS will rely upon the email address below to send a monthly invoice notification to the borrowing entity. The undersigned agrees to promptly notify CBS, in writing, of any subsequent changes to the email address. Consenting to an electronic monthly invoice notification requires that the undersigned have access to an active email address.

Loan Number: _____

Loan Name: _____

***Email Address:**

(Please Print Clearly)

*** Electronic Monthly Invoice Notifications will be sent to one email address only.**

Borrower Name:

Borrower Signature: _____ **Date** _____

Borrower Name (Print): _____

**Please fax or email the completed form to Cooperative Business Services, LLC.
Attention: Finance Department
Fax: 513-677-6789
Email: finance@cbscusso.com**