



TRUTH-IN-SAVINGS DISCLOSURE HEALTH SAVINGS ACCOUNT

Minimum balance to open the account – A minimum \$50.00 deposit is required to open this account. There is no limit to the number of checks paid from your account during the statement cycle. There is a minimum balance requirement of those funds necessary to pay for any administration or custodial fees. Your cancelled checks will be returned to you every statement cycle.

SERVICE FEES

| | |
|--------------------------------------|---|
| Visa Check Card | No Fee |
| Replacement for lost Check Card | \$5.00 |
| Authorized Signer Fee | \$5.00 |
| Items Returned for: | |
| *Insufficient Funds | \$35.00 |
| *Uncollected Funds | \$35.00 |
| *Overdraft (Savings) | \$35.00 |
| Returned Items: | |
| *Deposited, Redeposited or Cashed | \$10.00 |
| Stop Payment: | |
| Lobby | \$30.00 |
| Electronic | \$30.00 |
| Wire Transfers | |
| Incoming | No Fee |
| Outgoing (Domestic or International) | \$30.00 |
| Account Closing Fee | \$20.00 |
| *Foreign ATM Fee – | \$2.00 Fee for each transaction at a Foreign ATM. |

*A Foreign ATM Transaction Fee occurs when the consumer uses their Check Card at an ATM Center that is not owned by Leesport Bank.

HEALTH SAVINGS ACCOUNT

Rate Information – Your interest rate and annual percentage yield may change.

Frequency of rate changes – At our discretion, we may change the interest rate on your account at any time. There is no limitation of the amount the interest rate may change.

Determination of rate – The interest rate is determined by the bank and from time to time may change in its sole and unfettered discretion.

Compounding and crediting frequency – Interest will be compounded and credited to your account every month. If you close this account before accrued interest is credited, that interest will not be paid to you.

Minimum balance to open the account – You must deposit \$50.00 to open this account.

First HSA maintenance fee – A monthly maintenance fee of \$3.00 will be imposed by First HSA. Accountholders requesting Paper Statements will be charged an additional \$2.00 per month fee. Incorrect email addresses will result in the production of a paper statement with the monthly maintenance fee increased an additional \$2.00.

Minimum balance to obtain the annual percentage yield disclosed – You must maintain a minimum balance of \$500.00 in the account each day to obtain the disclosed annual percentage yield.

Daily balance computation method – We use the daily balance method to calculate the interest on your account. This method applies a daily periodic rate to the principal in the account each day.

Accrual of interest on non-cash deposits – Interest begins to accrue on the business day you deposit non-cash items (for example, checks).



TRUTH-IN-SAVINGS DISCLOSURE
Continued

YOUR ACCOUNT

These are the accounts you have opened or inquired about. If the figures are not filled in, please see the insert that is with this disclosure or your periodic statement.

- **HEALTH SAVINGS ACCOUNT**

Rate Information:

Tier 1 – If your daily balance is \$0.00 to \$499.99 or less, your account will not earn interest.

Tier 2 – If your daily balance is \$500.00 to \$999.99, the interest paid on the entire balance in your account will be 0.499% with an annual percentage yield of .50%.

Tier 3 – If your daily balance is \$1,000.00 to \$4,999.99, the interest paid on the entire balance in your account will be 1.24% with an annual percentage yield of 1.25%.

Tier 4 – If your daily balance is \$5,000.00 to \$14,999.99, the interest paid on the entire balance in your account will be 2.23% with an annual percentage yield of 2.25%.

Tier 5 – If your daily balance is greater than \$15,000, the interest paid on the entire balance in your account will be 3.15% with an annual percentage yield of 3.20%

MEMBER FDIC