

EXHIBIT B

Lea County State Bank

Demand Deposit Marketplace® (DDM®) Program Receiving Institution – Opt-Out Form

This Receiving Institution – Opt-Out Form (this “**Opt-Out Form**”) for the Demand Deposit Marketplace® (DDM®) Program (the “**Program**”) is signed and provided by you (named below) (“**Customer**” or “**you**”) to Lea County State Bank (“**Your Institution**”) to agree to the terms and conditions herein. Your Institution may rely on this Agency Appointment with respect to your participation in the Program.

By signing this Opt-Out Form, Customer hereby instruct Your Institution to exclude (*i.e.*, opt-out of) the following Receiving Institutions from holding Program Deposits under the Program. By signing below, Customer acknowledge receipt of, and agree to, the Program Customer Terms and Conditions (“**Customer T&Cs**”), which are expressly incorporated herein. Capitalized terms used in this Opt-Out Form have the same meaning given in the Customer T&Cs. “**Your Institution**” means Lea County State Bank.

Receiving Institution Name	FDIC Certificate Number	City and State

Check if separate sheet attached with additional names of excluded Receiving Institutions

This Opt-Out Form. This Opt-Out Form is effective once Your Institution receives a completed and signed Opt-Out Form from Customer and Your Institution has acknowledged acceptance of and had a reasonable time to act on this Opt-Out Form. You may submit additional Opt-Out Forms at any time in order to opt-out of additional Receiving Institutions. All Opt-Out Forms you submit will, together, form the list of Receiving Institutions that you have opted-out of from holding Program Deposits under the Program. If you wish to remove one of those Receiving Institutions from your list of opt-outs (so that Program Deposits can be placed at that Receiving Institution), please contact Your Institution.

Customer Name: _____
 Customer Signature: _____ Date: _____

