

Statement Copy Request

Fees must be paid at time of request (deducted from your account). Fees will be \$5.00 per statement requested. If research or other documents are requested, fees may be higher. Fee schedules are available upon request. Minimum fee is \$5.00.

Only the account owner can authorize copies. Valid photo identification required. Statement copies will be mailed to your address on record within seven days.

Date	: A	Account #		
Nam	ie			
Stree	et			
City	, State, Zip			
Hon	ne PhoneWork	Phone	Cell Phone	
Sign	ature			
Payr	nent will be deducted from your	account.	I authorize payment of \$t	0
	educted from		s or checking).	
	dates of statement copies you			
NOT	TE: Statement copies are not ava being requested. Savings o		til 20 days after the end of the month ints are quarterly.	
Stat	ement(s) requested (month/yea	ır)		
			to	
	**************************************	*****	*****	***