

[BANK NAME]

HOLD STATEMENT AGREEMENT

Customer Name and Address

Account Number(s)

_____	Account 1 _____
_____	Account 2 _____
_____	Account 3 _____

I hereby request the Bank to hold my statements on the above-referenced accounts. I understand the importance of retrieving these statements on a timely basis and agree to pick up statements promptly. I acknowledge my responsibility under state law to use reasonable care and promptness to examine each account statement and report to the Bank any unauthorized signatures or alterations within timeframes set forth in the Bank's "Customer Agreement". I further acknowledge and agree that the Bank may, but is not required to, mail these statements to me at the address on file for each account if a statement has not been retrieved within two weeks of statement date.

In addition to other account owners and authorized signers, I authorize the following individual(s) to retrieve statements on my behalf: \_\_\_\_\_

Authorized By \_\_\_\_\_ Date \_\_\_\_\_

Bank Rep \_\_\_\_\_ Branch \_\_\_\_\_ Date \_\_\_\_\_

Account Number	Date of Statement	Date Released	Bank Rep Releasing Statement	Signature of Individual Retrieving Statement