



## STATEMENT HOLD AGREEMENT

**Member Name:** \_\_\_\_\_

**Account #:** \_\_\_\_\_

**Name:** \_\_\_\_\_

I request the Polish & Slavic FCU to hold my statements on the above referenced account(s).

I understand the importance of retrieving my account statements on a timely basis and agree to request and pick up my statements promptly at the branch. I acknowledge my responsibility under the Membership and Account Agreement and Electronic Funds Transfer Act to use reasonable care and promptness to examine each account statement and report to the Polish & Slavic FCU any unauthorized transactions or payments within the timeframes set forth in the Membership and Account Agreement and the Electronic Funds Transfer Act disclosures.

I further acknowledge and agree that any billing errors or unauthorized transactions reported after 60 days from the date the statement became available or after 33 days from the date of unauthorized draft may not be honored. I also acknowledge that this form does not suppress any legal notifications required by law.

Authorized by: \_\_\_\_\_ Date: \_\_\_\_\_

MSR: \_\_\_\_\_ Branch: \_\_\_\_\_ Date: \_\_\_\_\_

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**\*\*\*FOR PSFCU USE ONLY\*\*\***

Mail Codes: 09- No Mail/ Member's Request (Member chooses to not receive paper statements and marketing material.)

Periodic statement should be requested on member's request at no fee if request is made timely (up to 60 days from statement date) and member completed this form.