



Research Request

Date Submitted _____

Time Submitted _____

Name _____

Member Number _____

Statement Date(s) _____

Share Draft Numbers(s) _____

Share Draft Amount(s) _____

Date(s) Cleared _____

I understand that there will be a research fee in the amount of \$20.00 per hour (\$20.00 minimum) in addition to \$3.00 per page for statement copies and \$3.00 per page for check copies. I also understand that research items are handled in the order in which they are received.

_____ (Signature)

___ Please call when complete. Contact telephone number _____

___ Please mail to address on account.

___ Please email when complete. Email address _____

Research fees will be deducted from my:

___ Draft/Checking ___ Share/Savings