



PERIODIC ACCOUNT STATEMENT REQUEST FORM

Account Name.....

Account Number.....

Statement Frequency

Savings & Current (Individual) Bank Accounts Current Accounts (Company)

Quarterly Monthly

Half Yearly Quarterly

Mode of Delivery

Email Email address.....

Post P. O. Box.....

Collect from my Branch Branch.....

No dispatch

Customer's Signature.....

Note: The Bank will provide periodic accounts statements for free within the indicated periods as indicated above. Any statement requests outside the indicated periods will attract bank charges as per the Bank's Tariff Guide.

For Official Use

Verified that the information has been captured correctly.

Name.....

Signature