

BANK STATEMENT REQUEST FORM

ATT: PLEASE FILL IN REQUIREMENTS IN RED & *

AGENT INFORMATION

| Agent Name * | | | |
|--------------------------------------|--|--------|----------|
| Agent Email * | | | |
| Agent Mobile # (Optional) | | | |
| ORDER DETAIL | | | |
| Date of Request * (YYYY - MM - DD) | | | |
| How Many Months * | | | |
| Statement Category * | Personal | | Business |
| Type of Statements * Activities | Monthly (E-Statement) | Others | |
| Statement Period * (YYYY - MM - DD) | From | | |
| | То | | |
| Have Original Statement? * | Yes (If available - Please Upload or Send Email) | | No |
| Delivery Speed * | Regular | RUSH | |
| CLIENT INFORMAT | TION | | |
| Client Full Name * | | | |
| Client First Name * | | | |
| Client Middle Name | | | |
| Client Last Name * | | | |
| Client Gender * | Male | Female | |
| Client Address (Current) * | | | |
| Client 2nd Account Holder Name (if 2 | Persons) | | |

| Client Company Name (If Bus | siness) | | | |
|------------------------------|---------------------------|---------------------|--------------------------------------|------|
| Client Company Address (If E | Business) | | | |
| STATEMEN | T INFORMATION | | | |
| Bank Name * | | | | |
| Transit Number * | | Account Number * | | |
| Account Type * | Cheque | Saving | Others | |
| Account Plan (Optional) | | | | |
| Opening Balance Amount \$ (| of the First Month) * | | \$ | |
| Closing Balance Amount \$ (c | of the Last Month) * | | \$ | |
| Have Payroll Deposit? * | Yes (If available - Pleas | se Upload or Send E | mail Paystubs or Provide Instruction | ons) |
| | No | | | |

Instructions / Informations of Payroll Deposits (Paydates & Amounts)

Instructions / Informations of Transactions to Add/Modify/Change/Remove (Name, Type, Dates & Amounts)

| ADDITIONAL INFORMATION | |
|---|--|
| dditional Notes (Any Special Note or Instructions) | |
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| PLEASE FILL & SIGN THE ABOVE FORM, SUBMIT ALONG WITH 2 IDS AT WWW.DIMEHUB.NET | |
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