

MID-KANSAS CREDIT UNION

No Statement Forms

I _____ account number _____ know that this is unusual, but I want you to hold the monthly statements on my accounts and not mail them to me as required by law. In making this request, I understand that I may fail to give you notice of some fraud committed to me and that I may lose some rights by not getting statements in timely fashion. This is a risk I agree to accept in return for Mid-Kansas Credit Union holding the statements and not mailing them to me. I hereby release Mid-Kansas Credit Union from any and all claims I may have against Mid-Kansas Credit Union arising out of the failure to mail the monthly statements and agree to indemnify and hold Mid-Kansas Credit Union harmless from any claims arising out of the failure to mail the monthly statements.

Member's Signature _____

Teller's Signature _____

Date _____

MOUNDRIDGE OFFICE

104 S. Ave. B, P.O. Box 608
Moundridge, Kansas 67107
620-345-2980
620-345-2996 FAX
1-888-345-2980 - Toll Free



BUHLER OFFICE

200 W. Second, P.O. Box 569
Buhler, Kansas 67522
620-543-2662
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