

# BANK and INVESTMENT INQUIRY



Medina County Veterans' Service Commission  
 210 Northland Drive - Medina, Ohio 44256  
 Phone: (330) 722-9368 - FAX: (330) 722-9378



Date: \_\_\_\_\_

Veterans Name	SSN
Spouses Name	SSN
Address	Home Phone
	Cell Phone

To whom it may concern, \_\_\_\_\_ has applied to our agency for financial assistance. We will need the following information from your bank/financial institution so that we may complete their application

**Checking Account Veteran**

Account # _____	Date Opened _____
Current Balance _____	Date Last Transaction _____
Amount Last Transaction _____	Date Closed _____

**Checking Account Veteran**

Account # _____	Date Opened _____
Current Balance _____	Date Last Transaction _____
Amount Last Transaction _____	Date Closed _____

**Checking Account Spouse or Joint**

Account # _____	Date Opened _____
Current Balance _____	Date Last Transaction _____
Amount Last Transaction _____	Date Closed _____

**Checking Account Spouse or Joint**

Account # _____	Date Opened _____
Current Balance _____	Date Last Transaction _____
Amount Last Transaction _____	Date Closed _____

Comments _____	Bank Stamp and Date _____
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**Authorization for Release of Information**

I, \_\_\_\_\_ hereby authorize \_\_\_\_\_, to give the Medina County Veterans Service Office complete information regarding any resources which I have under my name (maiden or other) or my spouse at your banking/financial institution. If I have accounts, other than those listed above, please release that information to this agency also.

Print Name \_\_\_\_\_ Signature \_\_\_\_\_ Date: