

To accompany the opening of a Charitable, Fundraising, Memorial, or Scholarship Fund Account at Watertown Savings Bank.

Fund Name: _____

EIN #: _____

Address:

Date:

Watertown Savings Bank
60 Main Street
Watertown, MA 02472

RE [Fund Name]:

To Whom It May Concern:

I, _____, of _____ [Full Address], would like to establish/open an account for the Fund Name. The purpose of this Fund is to

_____.

The funds are being collected by _____ [identify the sources of the funds]. This fund will benefit _____ [name of person/organization].

The authorized signer(s) on the account will be:

Sincerely,

Signature

Printed Name: _____

Address: _____

Email Address: _____

Phone Number: _____