STERLINGBANK

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SAFE DEPOSIT BOX LEASE

Box number: 1037-37-113	Type of Account:
Opening date: 05/04/2012	☑ Joint tenancy ☐ Individual
Annual rent: 110.00	☐ Corporation ☐ Partnership
Key deposit: 15.00	Other:
Box size; 10x10	Org. name:
Renter Information	
Name; Elana Laham	Name: Michael S\Laham
Street address: 530 Burnett Ave N # 10	Street address 530 Burnett Ave N # 10
City, State, Zip: Renton, WA 98057-5444	City, State, Zip: Renton, WA 98057-5444
Mother's maiden name:	Mother's majde hame:
Phone number	Phone number:
Birth date:	Birth date:
Social Security number:	Sholal Security number
ID type and number: <u>DI</u>	ID type and number: <u>ar</u>
Name:	Name;
Street address:	Street address:
City, State, Zip:	City, State, Zip:
Mother's maiden name:	Mother's maiden name:
Phone number:	Phone number:
Birth date:	Birth date:
Social Security number:	Social Security number:
ID type and number:	ID type and number:
Terms of Lease	To type and named .
above to you for the stated annual rent. Payments will b Annually Monthly Other: May We will give you notice D charg other; to pay the rent on this se	on the 4th day of each ge your account number: 7887412885 afe deposit box. We will continue to collect rent this way
until you request in writing a different payment method, you close your account. You agree to the stated terms of acknowlease receipt of at least one copy of this lease a	
SIGNATURE	Os GNAKAL
SIGNATURE	SIGNATURE SIGNATURE AUTHORIZED SIGNATURE FOR THE INSTITUTION
Surrender of Safe Deposit Box	
You are surrendering safe deposit box number/	ocated in our vaults.
This is the safe deposit box identified above. You have removed all propony fro	
	ansibilities in connection with the lease to you. You are (vibasing us from any and all ou had entered into with us. You are giving us (the full passession and control of this
si .	
9/25/2	·v/3
DATE .	SIGNATURE DATE
9/05,	10013
SIGNATURE DATE	Milysell 725/12
	AUTHORIZED SIGNATURE FOR THE INSTITUTION /

STERLINGBANK

SAFE DEPOSIT BOX LEASE

1027 27 163	Town of Consults
Box number: 1037-37-163	_ Type of Account: ☑ Joint tenancy ☐ Individual
Opening date: 05/04/2012	☐ Corporation ☐ Partnership
Annual rent: 110.00	Other:
Key deposit: 15.00	Org. name:
Box size: 10x10 Rentor Information	Olg. Hame:
Name; Elana Laham	Name: Michael S Laham
Street address: 530 Burnett Ave N # 10	Street address: 530 Burnett Ave N # 10
City, State, Zip: Renton WA 98057-5444	City, State, Zin: Renton, WA 98057-5444
Mother's maiden name:	Mother's maiden name:
Phone number:	Phone number:
Birth date:	Binteste:
Social Security number:	Sacial Security number:
ID type and number: Dr	ID type and number: Qri
	\sim
Name:	Name: Street address:
Street address:	_ 555.656.666.
City, State, Zip:	City, State, Zip: \
Mother's maiden name:	-
Phone number:	
Birth date:	Birth date: Social Security number:
Social Security number:	
ID type and number: Terms of Lease	ID type and number:
other: to pay the rent on this until you request in writing a different payment method you close your account. You agree to the stated term	narge your account number: 7887412885 s safe deposit box. We will continue to collect rent this way od, the lease is ended, we receive notice of your death, or ns on this form, including those contained on page 2, and e and two keys to the safe deposit box on the stated opening
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- I SIĞNATURE	SIGNATURE
SIC-WITCHE	
SIGNATURE	SIGNATURE ACTHORIZED SIGNATURE FOR THE INSTITUTION
Surrender of Safe Deposit Box	1/2/
You are surrendering safe deposit box number	
	espansiolities in connection with the lease to you. You are raiseling us from killy and all
claims of who was when went Johns forth 88 8 result of the lease agreeme	ent you had onlered into with us. You are giving us the full powkussion and control of this
a/p-	/
9/25/	281 2
חאוב	SIGNATURE DATE
4	SIGNATURE DATE
9/25/ SIGNATURE 9/25/	SIGNATURE DATE 2013 AUTHORIZED SIGNATURE FOR THE INSTITUTION AUTHORIZED SIGNATURE FOR THE INSTITUTION

STERLINGBANK

SAFE DEPOSIT BOX LEASE

Box number: 1037-37-211	Type of Account:
Opening date: 05/04/2012	☑ Joint tenancy ☐ Individual
Annual rent: 110.00	☐ Corporation ☐ Partnership
Key deposit: 15.00	Other:
Box size: 10x10	Org. name:
Renter Information	
Name: Elana Laham	Name: Michael S Laham
Street address: 530 Burnett Ave N # 10	Street address: 530 Burnott Ave N # 10
City, State, Zip: Renton	City, State, Zip: Renton, WA 98057-5444
Mother's maiden name:	Mother's maiden name:
Phone number:	Phone number:
Birth date:	Birth date
Social Security number:	Social Security number
ID type and number: Dr	1) type and number: D
Name:	Name:
Street address:	Street address:
City, State, Żip:	City, State, Zip:
Mother's maiden name:	Mother's maiden name:
Phone number:	Phone number:
Birth date:	Birth date:
Social Security number:	Social Security number:
ID type and number:	IO type and number:
Terms of Lease	rling Bank. We are renting the safe deposit box described
May . We will ☐ give you notice ☑ char on this suntil you request in writing a different payment method, you close your account. You agree to the stated terms of	on the 4th day of each ge your account number: 7887412885 afe deposit box. We will continue to collect rent this way the lease is ended, we receive notice of your death, or
acknowledge receipt of at least one copy of this lease a	no two keys to the sale deposit box on the stated opening
BIGNATURE	SIGNATURE
	()
SIGNATURE	SIGNATURE SIGNATURE AUTHORIZED SIGNATURE FOR THE INSTRUCTION
Surrender of Safe Deposit Box	
You are surrendering sale deposit box number 21/	located in our vaults.
signing below you ago-agreeing that we have fulfiled all of our dulies and respirations of any kind which many some formats a result of the lease agreement y	on, the sale deposit how, and that property is now in its owner's possession. By onsibilities in connection with the lease to you. You are releasing us from any and all you had whiered into with us. You are giving us the full possession and control of this
sale de	0/3
9/25/20 DATE	^{2/} 2
	SIGNATURE DAYE
1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	SIGNATURE DATE
SIGNATURE // DATE	SIGNATURE DATE 2013 SIGNATURE DATE DAT