

P.O. BOX 1144
NORTHRIDGE, CA 91328-1144

This Statement Covers

From: 02/16/08
Through: 03/17/08

Need assistance?

To reach us anytime,
call 1-800-788-7000
or visit us at wamu.com

SANDRA VILLANUEVA
48 CIRILLO DR
COLCHESTER CT 06415-1889

34686



Summary of All Accounts Included in This Statement

Product Name	Account Number	Term	Maturity Date	Balance As of 03/17/08
Free Checking	488-307516-5			\$77.39
Statement Savings	093-675257-7			\$498.80
Total Deposit Balance:				\$576.19

Deposits at Washington Mutual are FDIC Insured.

- Enter checks, other transactions and service charges not recorded.

[illegible]

AMOUNT

ADD YOUR DEPOSITS
MADE BUT
NOT SHOWN ON
THIS STATEMENT

SUB TOTAL

SUBTRACT YOUR TOTAL
OUTSTANDING
CHECKS AND OTHER
WITHDRAWALS
(FROM STEP 2)

THIS SHOULD AGREE WITH
THE BALANCE IN YOUR
ACCOUNT REGISTER

- Check addition and subtraction in your register and above.
- Compare your checks, other transactions, POP, ATM, POS and other withdrawals in your register with statement.
- Compare deposit receipts and entries in your register with statement.
- Be sure all checks, POP, ATM, POS and other payments and deposits are entered in your register.
- Be sure any interest credits are entered in the deposit section and fees entered in the debit section of your register.

We reserve the right not to pay any item or transaction presented against your account if presented when there are insufficient available funds in your account (subject to any overdraft line of credit or overdraft transfer service which you have linked to your account), even if we paid such items/transactions in the past. Unless you request us not to do so, by calling the number above, we may, but are not obligated to, establish an overdraft limit to pay item(s)/transaction(s) in excess of your available balance and any fees related to your account. We may note on the front of this statement that an overdraft limit was established and indicate an amount. **That amount is valid as of the statement date, but may change (be increased, lowered, or removed) at any time without notice, including before you actually receive your statement due to printing and mailing time as well as our process for reviewing overdraft limits.** An overdraft limit is not a line of credit. If you prefer not to have an overdraft limit, let us know and we would then generally return checks and other transactions that exceed your available balance. The best way to make sure your items/transactions are paid is to maintain sufficient available funds in your account to pay your authorized items/transactions and fees which may be due related to your account. If an item/transaction (such as a check or other transaction, like an ATM withdrawal, a point-of-sale transaction or electronic payment) is presented against insufficient available funds, we will charge a fee for each transaction, whether the item/transaction is paid or rejected and the fee, as well as any overdraft paid, will reduce the overdraft limit amount, if any. You must deposit additional funds to pay for your overdrafts and any associated fees immediately.

This information applies only to overdraft lines of credit issued to consumers primarily for personal, family or household purposes. **FINANCE CHARGES** on each advance accrue from the date we make the advance until the date the advance is paid in full. This means that there is no grace period that would allow you to avoid **FINANCE CHARGES** on advances on your Credit Line Account.

The periodic **FINANCE CHARGE** on your Credit Line Account for each billing period is a function of the Daily Periodic Rate, the "Average Daily Balance" of your Credit Line Account, and the number of days in the billing period. a) The "Daily Balance" of your Credit Line Account for each day will be (1) the Total Balance at the beginning of that day, plus (2) new advances or charges, minus (3) all payments and credits received on that day and applied (i) to principal, (ii) unpaid **FINANCE CHARGES** and (iii) any overlimit fees, dishonored payment fees and late fees to the extent such fees are added to the outstanding balance of your Credit Line Account. "Total Balance" means all amounts due on the Credit Line Account. b) The "Average Daily Balance" is the sum of the Daily Balances for all days in the billing period divided by the number of days in the billing period. c) The periodic **FINANCE CHARGE** for a billing period is calculated by multiplying the "Average Daily Balance" by the Daily Periodic Rate and multiplying the result by the number of days in the billing period.

If you think your ODLOC statement is wrong, or if you need more information about an ODLOC transaction on your statement, write to us, on a separate sheet of paper, at: Washington Mutual, P.O. Box 6868, Mailstop BR2CLFL, Lake Worth, FL 33466, Attn: Cash Operations, as soon as possible. We must hear from you no later than sixty (60) days after we sent you the first statement on which the error or problem appeared. You can telephone us, but doing so will not preserve your rights.

In your letter, give us the following information:

Your name and account number;

The dollar amount of the suspected error;

Describe the error and explain, if you can, why you believe there is an error.

If you need more information, describe the item you are unsure about.

You do not have to pay any amount in question while we are investigating, but you are still obligated to pay the amounts that are not in question. While we investigate your question, we cannot report you as delinquent or take any action to collect the amount you question.

WE MAY REPORT INFORMATION ABOUT YOUR ACCOUNT TO CREDIT BUREAUS. LATE PAYMENTS, MISSED PAYMENTS, OR OTHER DEFAULTS ON YOUR ACCOUNT MAY BE REFLECTED IN YOUR CREDIT REPORT.

IF YOU ARE IN BANKRUPTCY OR HAVE BEEN DISCHARGED, THIS IS FOR INFORMATIONAL PURPOSES
AND IS NOT AN ATTEMPT TO COLLECT A DEBT FROM YOU PERSONALLY

IN CASE OF ERRORS OR INQUIRIES ABOUT YOUR ELECTRONIC TRANSFERS:

Telephone us at: 1-800-788-7000 or for inquiries about ACH transactions, write to us at Wasnington Mutual ACH Services, P.O. Box 659634, San Antonio, TX 78265-9025; for inquiries about debit card transactions, write to us at Washington Mutual Debit Card Claims Processing, P.O. Box 9017, Pleasanton, CA 94556-9017; for inquiries about Bill Pay transactions, write to us at Bill Pay, Attn: Bill Pay Back Office, 400 E. Main Street, MS ST2ABPC, Stockton, CA 95202, as soon as you can, if you think your statement or receipt is wrong, or if you need more information about a transfer listed on the statement or receipt. We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem or error appeared.

Tell us your name and account number.

Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.

Tell us the dollar amount of the suspected error.

If you tell us orally, we may require that you send us your complaint or question in writing within 10 business days. If you are a natural person and your account is used primarily for personal, family or household purposes: we will tell you the results of our investigation within 10 business days, or 20 business days if your account is a new account (generally 30 days after the first deposit made to the account), after we hear from you and will correct any error promptly. If we need more time, however, we may take up to 45 days, or 90 days in the case of a new account, an ATM transaction outside of the United States or any POS transaction, to investigate your complaint or question. If we decide to do this, we will recredit your account within 10 business days, or 20 business days in the case of a new account, for the amount you think is in error. You will have the use of the money during the time it takes us to complete our investigation. If we ask you to put your complaint or question in writing and we do not receive it within 10 business days (20 days as applicable), we may not recredit your account. If we decide that there was no error, we will send you a written explanation within three business days after we finish our investigation. You may ask for copies of the documents that we used in our investigation.

ATM-CHG = AUTOMATED TELLER MACHINE TRANSACTION, FEE CHARGED
ATM-NCHG = AUTOMATED TELLER MACHINE TRANSACTION, NO FEE CHARGED
ATM-TRANSFER = AUTOMATED TELLER MACHINE TRANSFER
ATM-WDL = AUTOMATED TELLER MACHINE WITHDRAWAL
CASH AD = CASH ADVANCE TRANSACTION
MC = DEBIT MASTERCARD TRANSACTION (PIN NOT USED)
OLB = ONLINE BANKING TRANSACTION
POP = POINT OF PURCHASE TRANSACTION
POS = POINT OF SALE TRANSACTION (PIN USED)
RCK = RE-PRESENTED CHECK
VISA = CHECK CARD TRANSACTION (PIN NOT USED)

Your Free Checking Detail Information

SANDRA VILLANUEVA
Account Number: 488-307516-5
Washington Mutual Bank, FA

Your Account at a Glance

Beginning Balance	\$77.39
Checks Paid	\$0.00
Other Withdrawals	\$0.00
Deposits	\$0.00
Ending Balance	\$77.39

Calendar Year-To-Date Overdraft/Non-Sufficient Funds Charges

(excluding any charges which have been waived or refunded):

Overdraft charges	\$0.00
Non-Sufficient Funds charges	\$0.00

Your Overdraft Limit as of the statement end date: \$1,000.00

Please note that this may be changed at any time without notice (see reverse for more information).

As of the statement end date, the fee for any Non-Sufficient Funds transaction, whether paid or returned, was \$32.00 per transaction.

Your Statement Savings Detail Information

SANDRA VILLANUEVA
Account Number: 093-675257-7

Your Account at a Glance

Beginning Balance	\$498.69	Interest Earned	\$0.11
Other Withdrawals	\$0.00	Annual Percentage Yield Earned	0.26%
Deposits	+\$0.11	YTD Interest Paid	\$0.27
Ending Balance	\$498.80	YTD Interest Withheld	\$0.00

Date	Description	Withdrawals (-)	Deposits (+)
03/17	Interest Payment		\$0.11

As of the statement end date, the fee for any Non-Sufficient Funds transaction, whether paid or returned, was \$32.00 per transaction.

