

USAgencies Credit Union Certificate Order Form

Member & Joint Owner Information:

Account #: _____

Member's Name: _____ SSN: _____

Joint Owner's Name: _____ SSN: _____

Joint Owner's Name: _____ SSN: _____

Member's Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone Number: _____ Daytime Phone Number: _____

Signature of All Owners:

Member's Signature _____ Date _____

Joint Owner's Signature _____ Date _____

Joint Owner's Signature _____ Date _____

Term, Investment Amount & Source of Funds:

(Please Note: All certificates are available in increments of \$100.00 after original minimum deposit of \$1,000.00.)

Term: _____ Investment Amount: \$ _____

_____ Transfer \$ _____ from _____ Account # _____.

_____ Check in the amount of \$ _____ enclosed.

_____ Rollover enclosed Certificate Number _____.

Type of Interest Payment:

(Please Note: All interest is compounded and paid monthly.)

_____ Add Interest to Principal Balance _____ Deposit Interest to Account # _____

Ownership:

(Please choose only one ownership option.)

- _____ 1.) Single Owner
- _____ 2.) Joint Ownership, requiring both signatures for negotiation, without rights of survivorship.
- _____ 3.) Joint Ownership, requiring only one signature for negotiation, without rights of survivorship.
- _____ 4.) Joint Ownership, requiring both signatures for negotiation, with rights of survivorship.
- _____ 5.) Joint Ownership, requiring only one signature for negotiation, with rights of survivorship.

Please Note:

USAgencies Credit Union has a Funds Availability Policy. The terms of this policy may change from time to time. Rates can change at any time. Please contact the credit union for current certificate rates.