



ALCOSE Credit Union
3001 Jacks Run Rd Suite 101
White Oak, Pa 15131
P: 412-673-2450 F: 412-673-2483
www.alcosecu.com

CERTIFICATE OF DEPOSIT (CD) WITHDRAWAL FORM

Name: _____ Account Number: _____

PLEASE NOTE: ALL CD withdraw forms must be recieved within ten days of the CD maturity date.
CD's will automatically rollover at the same term if a withdraw request is not received in that timeframe. Forms not completed in their entirety will be returned to the member and could delay any requests.

Certificate Number: _____

- Deposit the funds from the CD into my savings account.
- Mail the funds from the CD to the address Alcose Credit Union has on file.
- Pick up a check at the White Oak office
- Pick up a check at the Carrick office

Signature (electronic signatures will not be accepted) Date

<p>For CU Staff Only:</p> <p>Received Date: _____</p> <p>Processed Date: _____</p> <p>Teller Initials: _____</p>
