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

REQUEST FOR CERTIFICATE OF DEPOSIT

Name: _____ Account Number: _____

Address: _____ Home Phone: _____

_____ Cell Phone: _____

Certificate Amount: _____
Minimum $1,000 -Maxium $50,000

Please check where the fund are coming from.

☐ Shares (Savings or Checking)
☐ Cash
☐ Renew current CD with interest
☐ Renew current CD without interest

Check what term you want:

☐ 12 Months
☐ 18 Months
☐ 24 Months
☐ Special

To add a Beneficiary or joint Owner, Please complete the information below and Check the appropriate box:
☐ Joint Owner
☐ Beneficiary

Name: _____
Address: _____

_____
Birth Date: _____
Social Security# _____
Relationship to Member: _____

Signature: _____ Date: _____
Electronic signatures accepted through eDoc only

For CU Staff Only

Certificate # _____ Maturity Date: _____

Rate: _____ Teller Initials: _____