



**REQUEST FOR
CERTIFICATE OF DEPOSIT**

Date _____

Account # _____ Name _____ Social Security # _____

Term _____ Amount \$ _____ From _____

Interest Rate* _____ * (Renewal rate subject to change to applicable rate on the actual day of renewal)

Named Owner/Owners on certificate _____

ORIGINAL CERTIFICATE IS REQUIRED FOR SURRENDER OF PAYMENT

One owner signature for withdrawal All owners signatures for withdrawal

Beneficiary(ies) _____

Interest Paid To _____

Owner Certification: Under penalties of perjury, I certify (1) that the number shown on this form is my correct Social Security Number and (2) that I am not subject to backup withholding either because I have not been notified that I am subject to backup withholding as a result of a failure to report all interest or dividends, or the Internal Revenue Service has notified me that I am no longer subject to backup withholding.**

** (Strike out the language in (2) if the Internal Revenue Service has notified you that you are subject to backup withholding and has not terminated that notification.)

Member Signature _____

Teller Initials _____