



(312) 726-8814 ♦ www.cpdfcu.com ♦ (312) 499-8866 (Fax)

# SHARE CERTIFICATE REQUEST FORM

Member Account Number: \_\_\_\_\_ Name: \_\_\_\_\_

Term: \_\_\_\_\_ months Amount: \$ \_\_\_\_\_

Automatic Renewal:  Yes  No Compounding:  Yes  No  Transfer From Shares  New Certificate (Money)

Co-owner(s) OR  Beneficiary(ies)

Name \_\_\_\_\_

Name \_\_\_\_\_

Street \_\_\_\_\_

Street \_\_\_\_\_

City/state/zip \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Social Security # \_\_\_\_\_

Social Security # \_\_\_\_\_

Phone \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Email \_\_\_\_\_

Name \_\_\_\_\_

Name \_\_\_\_\_

Street \_\_\_\_\_

Street \_\_\_\_\_

City/state/zip \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Social Security # \_\_\_\_\_

Social Security # \_\_\_\_\_

Phone \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Email \_\_\_\_\_

\_\_\_\_\_  
Primary Member's Signature (Required)

\_\_\_\_\_  
Date

### FOR CREDIT UNION USE ONLY

.....  
Certificate Number: \_\_\_\_\_ % APR: \_\_\_\_\_ %APY: \_\_\_\_\_

Processed By Teller # and Initials: \_\_\_\_\_ / \_\_\_\_\_ Date Processed: \_\_\_\_\_

**EXTRA .25% CHECKING & ACH RATE VERIFICATION: Manager Teller # \_\_\_\_\_ / Date \_\_\_\_\_**

**\*Scan After Processing\***