



Term Share Certificate Form (CD's)

Name: _____

Address: _____

City, State, Zip: _____

Account #: _____ Social Security: _____

Joint Certificate, circle one: NO or YES

Joint information: Name: _____

Address: _____

Date of Birth: _____ Social Security # _____

Joint Account # (if applicable): _____

Type of Share Certificate:

Office Use	<u>TERM</u>	<u>MINIMUM</u>	Choose certificate	Amount	Deposit or transfer	Check or Cash – if deposit	Interest Retained or Transfer
Example	12 Month	\$ 1,000.00	X	\$1,500	deposit	Check # 123	retained
16	6 Month	\$ 1,000.00					
96	6 Month	\$ 10,000.00					
12	12 Month	\$ 1,000.00					
21	12 Month	\$100,000.00					
18	18 Month	\$ 1,000.00					
24	24 Month	\$ 1,000.00					
26	24 Month	\$100,000.00					
30	30 Month	\$ 1,000.00					
36	36 Month	\$ 1,000.00					
48	48 Month	\$ 1,000.00					

Signature: _____ Date: _____

Joint Signature: _____ Date: _____

***THERE IS A PENALTY OF 60 DAYS DIVIDENDS/INTEREST FOR EARLY WITHDRAW.**

The dividend rate/annual percentage yield is fixed for the term of the certificate. A notice of all certificates due for renewal will be mailed approximately 10 days in advance. An automatic rollover of the certificate will take place unless certificate holder gives different directions.