

## Term Share Certificate Form

N	Name:							<del></del> -
Address:								
City, State, Zip:								
Account #: Social Security:								
J	oint Certificat	e, ci	rcle one: NC	or YES				
	Joint inform	atio	n: Name:					
Address:Social Security #								
Joint Account # (if applicable):								
T	Type of Share	Cert	ificate:					
Office Use	<u>TERM</u>	<u>N</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	\$1	.00,000.00					
18	18 Month	\$	1,000.00					
24	24 Month	\$	1,000.00					
26	24 Month	\$1	.00,000.00					
30	30 Month	\$	1,000.00					
36	36 Month	\$	1,000.00					
48	48 Month	\$	1,000.00					
Signature:							Date:	<del></del>

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

Joint Signature: \_\_\_\_\_

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.

Date: