



Deposit/Withdrawal Form

My Name: _____ Date: _____

Mail to: Element FCU, 3418 MacCorkle Ave SE, Charleston, WV 25304 Phone: 304.721.4145

Deposits

Currency \$ _____
 Coin \$ _____
 Check #1 \$ _____
 Check #2 \$ _____
 Check #3 \$ _____
 Total \$ _____
 Less Cash Received \$ _____

Net Savings Deposit \$ _____
 To Acct # _____
 Net Checking Deposit \$ _____
 To Acct # _____

Withdrawals

- I want Cash. Give me \$ _____ from Checking Acct # _____
Give me \$ _____ from Savings Acct # _____
- I want a Check. The check amount is \$ _____
Check payable to: _____
Withdraw the amount from Acct # _____
- I want to buy stamps. I need ____ stamps totaling \$ _____
 Please deduct this amount from Acct # _____
 I am paying cash for my stamps.
- I want a Cash Advance on my credit card. Give me \$ _____
My MasterCard number is _____
Give me Cash Check or Deposit to Acct # _____

I authorize Element FCU to perform these transactions on my account. Sign Here X _____

Deposits may not be available for immediate withdrawal. If no distribution is provided, the deposit will be made to the checking first, then savings.



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