



Member's Name _____

Share Account No. _____

Authorization To Open Certificate of Deposit Accounts

Type of Certificate of Deposit Account To Open:

☐ 6 Month ☐ 9 Month ☐ 1 Year ☐ 2 Year ☐ 3 Year ☐ 4 Year ☐ 5 Year
☐ 6 Month Safari ☐ Tax Factor 1 Year ☐ Special CD Offering _____

I wish to receive interest: *Changes to interest allocation not available for 6 month, 9 month, or Tax Factor CDs

☐ Monthly*, deposit to Account No. _____
☐ Quarterly*, deposit to Account No. _____
☐ On the maturity date of my 6 month, 9 month, or Tax Factor CD, deposit to Account No. _____
☐ Credited to this Certificate of Deposit Account

Issue my Certificate of Deposit Account for \$ _____

☐ Check/Cash ☐ Transfer From Account No. _____

I understand that my signature below acknowledges the receipt of the terms, conditions, and penalties of a Certificate of Deposit Account with Associated Credit Union and that I have received the Truth-In-Savings Disclosure and Rate Disclosure. I also understand that this account will automatically renew for the same term at maturity. In case of the death of any single owner or all joint owners prior to the renewal date, the certificate will not be renewed and will be transferred to the members' Primary Share Account.

PRIMARY OWNER INFORMATION

Name (print) _____ Signature _____ SSN _____

Phone (work) _____ Phone (home) _____ E-mail _____ Date _____

JOINT OWNER INFORMATION *PO Box Address not allowed

Name (print) _____ Signature _____ SSN _____

DOB _____ ID Type _____ ID Number _____

ID Issue Date _____ ID Expiration Date _____

Address * _____

**If The Joint Owner Being Added Is Not An Existing Joint Owner Or Primary Member,
A Copy Of A Valid Driver's License Or State Issued ID Must Be Enclosed Along With The Return Of This Form.**

BENEFICIARY INFORMATION (Signature of Beneficiary not required. SSN and DOB is encouraged, but not required.)

Name (print) _____ SSN _____ DOB _____

Name (print) _____ SSN _____ DOB _____

Certificate of Deposit Accounts are non-negotiable and non-transferable, and the credit union may withdraw this offer at any time. There are penalties for early withdrawals from Certificate of Deposit Accounts. The 9 Month WIN, WIN Account allows one early withdrawal or early redemption without penalty. Interest on all regular Certificate of Deposit Accounts is reported to IRS for the year in which it is paid or made available to you. Interest on the Tax Factor is reported for the year it is paid, as it is paid once at maturity. Rates Determined Weekly. The interest rate and annual percentage yield that will apply to your renewal is available weekly on our website (acuonline.org), you may also call 770-448-8200.

OFFICE USE ONLY

Certificate of Deposit ID Number _____