

# Transaction Form

**NO CASH PLEASE • ENDORSE AND ENCLOSE ALL CHECKS**

Mail to SEFCU, P.O. Box 12189, Albany NY, 12212

## DEPOSITS

**IMPORTANT:** Your deposit is subject to verification.

Account # \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

The above address is new.

Mint Share account \$ \_\_\_\_\_

Preferred Savings account \$ \_\_\_\_\_

Preferred Plus \$ \_\_\_\_\_

Checking account \$ \_\_\_\_\_

Holiday Club account \$ \_\_\_\_\_

Owner's Choice \$ \_\_\_\_\_

Other \_\_\_\_\_ \$ \_\_\_\_\_

## LOAN PAYMENTS

Make checks payable to: **SEFCU**

Mortgage loan

# \_\_\_\_\_ \$ \_\_\_\_\_

Home equity loan

# \_\_\_\_\_ \$ \_\_\_\_\_

Auto loan

# \_\_\_\_\_ \$ \_\_\_\_\_

Personal loan

# \_\_\_\_\_ \$ \_\_\_\_\_

Other (specify)

# \_\_\_\_\_ \$ \_\_\_\_\_

Withdrawal requested \$ \_\_\_\_\_ Suffix \_\_\_\_\_

Transfer request from \_\_\_\_\_ to \_\_\_\_\_ Amount \$ \_\_\_\_\_

Signature required \_\_\_\_\_

Visa®  Capital  Gold