



California Adventist Federal Credit Union

1441 E. Chevy Chase Drive, P.O. Box 9513

Glendale, CA 91206

Phone (818) 246 - 7241

email: operations@sdacreditunion.com

website: www.sdacreditunion.com

CERTIFICATE OF DEPOSIT REQUEST

MEMBER NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

ACCOUNT NUMBER: \_\_\_\_\_

I, \_\_\_\_\_, authorize CAFCU to book a certificate of deposit in my account with the following term, rate, and initial deposit.

Term: \_\_\_\_\_ MONTHS

Rate: \_\_\_\_\_ APY

Initial Deposit: \$ \_\_\_\_\_

PLEASE MARK ONE OF THE FOLLOWING:

BOOK UNDER PRIMARY ACCOUNT HOLDER ONLY

BOOK UNDER PRIMARY AND JOINT ACCOUNT HOLDER (LIST JOINT(S) NAME BELOW):

\_\_\_\_\_  
\_\_\_\_\_

MEMBER SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

FOR CREDIT UNION USE ONLY:

CD OPENED BY: \_\_\_\_\_

OPENED ON: \_\_\_\_\_

CD NUMBER: \_\_\_\_\_ MATURITY DATE: \_\_\_\_\_