

NY TEAM Federal Credit Union
65 Broadway
Hicksville, NY 11801
(516) 822-1070
Fax: (516) 822-2478

CD EARLY WITHDRAWAL

www.nyteamfcu.org

Member #: _____

Teller #: _____

Date: _____

I authorize NY TEAM to make and accept the following changes to my/our accounts

Member's Information

Primary Member: _____

DOB: _____

CD Suffix #: _____

Maturity Date: _____

I would like to close out my certificate early.

_____ At maturity please transfer my certificate into my

_____ Share Account

_____ Draft Account

Penalty Fee: _____

Disclosure

Penalty Fee: Up to 12 month term 90 days of dividends, whether earned. 13-24 months - 180 days of accrued dividends whether earned, 25+ months - 270 days of accrued dividends whether earned.

I and We agree that the changes on this card amend the previously signed Account Card and are subject to the terms and conditions of the Membership Agreement. Truth in Savings, Fee Schedule, Funds Availability Policy Disclosure. If applicable to any amendment the CU makes from time to time which are incorporated herein. I/We acknowledge receipt of a copy of the agreements and disclosures applicable to all accounts and services.

Member Authorization

Don't forget to verify your Beneficiary Information and Sign up for E-Notices!

Primary Signature

Joint Signature

Date

Date