



MAIL TO:
 PAYMENTS / DEPOSITS
 COASTAL FEDERAL CREDIT UNION
 PO BOX 58300
 RALEIGH NC 27650-8300

Account Name (Print)				Account Number					
<input type="checkbox"/> Send More Payment/Deposit Envelopes <input type="checkbox"/> Return Receipt Requested				Product Codes C1- Basic Checking CS- Christmas Savings PS- Primary Savings C2- Dividend Checking SS- Special Savings C3- Go Green Checking MM- Money Market					
Check Withdrawals		Sub	Checks		Checks		Deposit		
Amount	<input type="checkbox"/> Savings	_____	Check #	Check Amount	Check #	Check Amount	Product Code	Sub	Amount
\$ _____	<input type="checkbox"/> Checking	_____							
	<input type="checkbox"/> Loan	_____							
For a loan transaction my signature below acknowledges receipt of a cash advance resulting from this transaction and agreements set forth on the Loan and Security Agreement on file in the Credit Union, a copy of which I previously received. For a share transaction, my signature acknowledges a cash withdrawal paid to myself and charged to the indicated account.									
Signature						Loan Payment(s)			
_____						Product Type	Sub	Amount	
			Check Amount Total						