



JPS & PARTNERS

CO-OPERATIVE CREDIT UNION LTD.
Your Financial Partner For Life



Fixed Deposit Application Form

Member Name: _____

Member Account Number: _____

Contact Number: _____

Email Address: _____

Deposit Instructions

I, _____, hereby request that the sum of:

(In words): _____

\$ _____ be transferred from Shares Special Deposit to a

Fixed Deposit Account for a period of: 30 Days 60 Days 90 Days Other: ____ Days

Member Declaration

I confirm that the funds being deposited are from a legitimate source and I authorize the Credit Union to place the above amount in a Fixed Deposit Account under the terms and conditions of the institution.

Signature of Member: _____

Date: _____

For Official Use Only

Processed By: _____

Date Processed: _____

Transaction Reference #: _____

Verified By: _____