

# Bluegrass Community Federal Credit Union

## Certificate of Deposit

Issue Date:

Member Name:

CD Number:

Amount \$:

Minimum Balance \$:

Term -

Maturity Date -

Grace Period -

### PENALTY FOR EARLY WITHDRAWAL

Automatic Renewal

Single Term

Rollover

<u>Rate Information</u>	<u>Interest Payment Option</u>	<u>Payment on Maturity</u>
Interest Rate % _____	Annually <input type="checkbox"/>	Transfer to Acct # _____
Annual Percentage	At Maturity <input type="checkbox"/>	Payment by draft _____
Yield: % _____	Monthly <input type="checkbox"/>	Rollover _____
	Quarterly <input type="checkbox"/>	

Document by: \_\_\_\_\_

This Certificate of Deposit evidences the opening of this Account and the deposit of funds in accordance with the terms herein and the Credit Union's current Truth-in-Savings Disclosure and is incorporated by the reference. Your account is nontransferable and nonnegotiable.

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*Bluegrass Community Federal Credit Union*

Hours of Operation  
Monday-Friday  
8am-5pm

2205 Carter Avenue  
Post Office Box 81  
Ashland, KY 41105-0081

Ph:606-408-7435  
Fax: 606-324-0898