Large Dollar Check Notification

(\$1500 or more – Include Copy of Check & Receipt when faxing this form to the CU)

[] Same Day Availability [] 2-Day Hold placed

Member
Member Name:
Member Account Number:
Member Credit Union:
Credit Union Fax Number:
Check
Amount of Check:
Check Number:
Paid By:
Paid To:
Other
Member Financial Institution:
R&T:
Xtend CUSB:
Comments
Employee Name:
Date: Phone Number: