



2200 West Min Street, Suite L100, Durham, NC 27705
Drive Thru Hours: Monday-Thursday, 8a-5p, Friday, 8a-6p



Please select account suffix

Name (Print) _____

Account Number _____

WITHDRAWAL INFORMATON

DEPOSIT / PAYMENT INFORMATOIN

Amount of withdrawal _____ Suffix _____

Amount of transfer _____ (\$1000.00 Withdrawal Limit)

From Account _____

To Account _____

Signature _____

Cash _____

Check _____

Sub-total _____

Visa Payment _____

Loan Payment _____

Suffix _____

Less Cash Received _____ (\$1000.00 Withdrawal Limit)

Total Deposit _____

Signature _____

(Required with photo i.d. for cash back)



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