

Fax: 703.245.0540 infirstfcu.org

LOAN PAYMENT/DEPOSIT VOUCHER

Click in field area to type	
MEMBER NUMBER	DATE (mm/dd/yyyy)
NAME	
ADDRESS	
TELEPHONE	
HOME	WORK

RETURN THIS PORTION WITH PAYMENT IN THE ENCLOSED ENVELOPE.

CHECK IF YOU DO NOT NEED TO RECEIVE A RECEIPT			
SAVINGS (SHARES)			
CHECKING (DRAFT)			
IRA CONTRIB. TAX YR.			
LOAN PAYMENTS #			
LOAN PAYMENTS #			
OTHER			
Click in field area to type TOTAL	0.00		

Deposits may not be available for immediate withdrawal.



	Cut along this	s line and kee	p the bottom	portion for	your records
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INTITST / Federal Credit Union
Phone: 703.914.8700 / 540.986.0652
Fax: 703.245.0540
infirstfcu.org

DEPOSIT REGISTER Keep for your records				
MEMBER NUMBER	DATE (mm/dd/yyyy)			
NAME				

Type the check information in the provided fields below.			
Check #	Amount	Type (payroll, personal, etc.)	Comments
TOTAL	\$0.00	Make sure this amount matches the total on the deposit youcher	