



Tulare County complete the form & send via Mail, Message, or drop off at your local branch.

MEMBER NAME	AC	ACCOUNT#		
ADDRESS			_	
LOAN SUFFIX(S)	DAYTIME	E PHONE		
VALID EMAIL ADDRI	ESS			
may result in additional finance to accrue even when payments a Insurance – certain conditions a	s optional and is only offered to select members based on cred charges being incurred and the repayment schedule to be exter are deferred. Deferred payments may also affect member-elect and exclusions may apply. Please refer to your specific agreeme roval. Mortgages, Visa Credit Cards and LOC's are not eligible	stended. Interest begins accruing upon loan disbursement ected protection coverage(s), such as Debt Protection and ment(s) and contact your protection provider for details.	nt and continues ad GAP	
I hereby authorize the DISCOUNTED \$35.00 deferral fee to be transferred from my:		Choose only one month t	to defer	
Savings Account	Checking Account	□ November □		
I have enclosed a check for \$35.00 Set up on auto payments				
FOR INTERNAL USE Received by:	SIGNATURE	DATE		