



**GEORGIA DEPARTMENT OF PUBLIC SAFETY CREDIT UNION**  
 P.O. Box 1456  
 Atlanta, GA 30371-1456

**LOANLINER.**

**Open-End Voucher**

**BORROWER INFORMATION**

BORROWER 1 NAME (LAST) (FIRST) (INITIAL)	ACCOUNT NUMBER	AMOUNT REQUESTED/PURPOSE \$	DATE
ADDRESS	SOCIAL SECURITY NUMBER	PLEASE CHECK ONE:	
CITY STATE ZIP	HOME TELEPHONE NUMBER	<input type="checkbox"/> DEPOSIT IN ACCOUNT NUMBER:	<input type="checkbox"/> MAIL THE CHECK <input type="checkbox"/> PICK UP THE CHECK
BORROWER 2 NAME (LAST) (FIRST) (INITIAL)	ACCOUNT NUMBER	CHECK PAYABLE TO: _____	
ADDRESS (IF DIFFERENT THAN BORROWER 1)	SOCIAL SECURITY NUMBER	REPAYMENT METHOD:	
		<input type="checkbox"/> AUTOMATIC TRANSFER	<input type="checkbox"/> PAYROLL DEDUCTION
		<input type="checkbox"/> CASH PAYMENT	<input type="checkbox"/> MILITARY ALLOTMENT

**REPAYMENT TERMS**

<b>CREDIT UNION USE</b>	DAILY PERIODIC RATE	<b>ANNUAL PERCENTAGE RATE</b>	FIXED	OTHER FEES (Amount and Description)	NEW BALANCE THIS SUBACCOUNT	
		%	VARIABLE	\$	\$	
	AMOUNT ADVANCED	PAYMENT AMOUNT	DATE DUE	PAYMENT FREQUENCY	LINE OF CREDIT LIMIT	REMAINING LIMIT
	\$	\$			\$	\$

**SIGNATURES**

By signing below, by endorsing the proceeds check or by using the amount advanced and deposited into your share/share draft account you agree to make payments as disclosed above in accordance with the terms of your Credit Agreement.

**X** (SEAL)

**X** (SEAL)

BORROWER 1 SIGNATURE

DATE

BORROWER 2 SIGNATURE

DATE

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 TO ORDER: 1-800-356-5012

**CREDIT UNION COPY**

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