La Capitol
FEDERAL CREDIT UNION
Federally Insured by NCUA

Check Order Form

Complete and return to La Cap.

P.O. BOX 3398, BATON ROUGE, LA 70821-3398 • PHONE: 800-522-2748 or 225-342-5055 • FAX: 800-297-2717 or 225-342-9135

Member Number: _____

Promotional Offer: ☐ Yes ☐ No

☐ **New Order** ☐ **Reprint**

Please provide the information you want to have printed on your checks.

Basic Information

Please print name(s) and address as they are to appear on your checks, or attach a voided check or deposit ticket from your present checking account if you want your new checks to contain the same information.

Name _____

Address _____

City _____ State _____ Zip _____

Optional Information

Complete only the information you want printed on your checks. (Leave others blank.)

Phone No. _____ Driver's License No. _____ State _____

Employer _____

Other _____

Selection of Checks

Preferred Starting # _____

Select the style of checks you prefer by going to *lacapfcu.org*. You will need to provide the following information to complete your order.

Style choice *(Select one.)* ☐ Wallet Duplicate ☐ Deskbook

Design choice *(Print design name as shown on checkbook price list.)* _____

Quantity ☐ **[1] Box of 80 checks** ☐ **[2] Boxes of 80 checks** *(each)*

Special lettering style *(optional)*

Are you over age 65? ☐ **Yes** ☐ **No**

NOTE: Your La Cap checking account will be automatically charged for the cost of your check order. You will *not receive a notice of this deduction*; however, the amount will be shown on your monthly statement.