

FILL OUT ONLINE. Conveniently fills in all three forms by typing and tabbing through the first form.

SAVINGS ACCOUNT DEPOSIT SLIP

SAVINGS ACCOUNT DEPOSIT SLIP

SAVINGS ACCOUNT DEPOSIT SLIP

Date _____

Date _____

Date _____

Account No. _____

Account No. _____

Account No. _____

Name _____

Name _____

Name _____

Street _____

Street _____

Street _____

City _____ State _____

City _____ State _____

City _____ State _____

Zip _____

Zip _____

Zip _____

	Dollars	Cents
CASH		
CHECKS		
TOTAL		

	Dollars	Cents
CASH		
CHECKS		
TOTAL		

	Dollars	Cents
CASH		
CHECKS		
TOTAL		



IMPORTANT: All checks must be properly endorsed.

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**INDIANA UNITED METHODIST
LOAN FUND, INC.**
1001 North Western Avenue, Suite D
Marion, Indiana 46952
765-664-2327 • 866-669-2327
www.iuulf.org



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For Office Use Only

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Return this copy to the Loan Fund office with your deposit.
RETURN RECEIPT

Return this copy to the Loan Fund office with your deposit.
OFFICE COPY



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Keep this copy for your records.