Federal Credit Union
Phone: 703.914.8700 / 540.986.0652
Fax: 703.245.0540
infirstfcu.org

Credit Card Cash Advance Form

Member Name: _____ Member Number (Last 4 Digits): _____

InFirst Credit Card Number (Last 4 Digits): _____ Email: _____

Cell Phone: _____ Home Phone: _____ Work Phone: _____

Current Mailing Address: _____

I request a cash advance from my InFirst credit card listed above in the amount of $ _____.

Transfer my cash advance into the following share: ☐ Savings ☐ Checking

The cash advance fee is 3% of the amount of the cash advance, subject to a minimum fee of $5.00.

The maximum amount you can obtain with a cash advance is 50% of your credit card limit.

I understand that I will not earn rewards points on a cash advance.

Member Signature: _____ Date: _____

Credit Union Use Only:

Date Received: _____

Date Cash Advance Processed: _____

Initials: _____ Teller #: _____