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www.laborcu.org

CHECK ORDER FORM/OPT-OUT REQUEST

Please complete this form or legibly print the information you would like printed on your checks.

Account #: _____

Name: _____

Joint Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Starting Number: — ex. 10¹ _____

Your complementary initial check order should arrive in 7-10 business days.

Additional checks and styles can be ordered on line at www.laborcu.org or at www.ordermychecks.com.

Opt-Out: (check all that apply)

This information will be used to update/establish your account preferences.

- I opt-out of the automatic approval of a debit/check card.
- I opt-out of It'sMe247 Online Banking Access.
- I opt-out of e-Statements. e-Statements are safe and secure through It'sMe247 Online Banking.

Signature _____

Date _____