



Catholic United Financial CREDIT UNION

3499 Lexington Ave N
Saint Paul, MN 55126

PHONE: 651-765-4132
FAX: 651-765-6551
FREE: 877-871-8313

www.catholicunitedCU.org



Date: _____

Name: _____

Address: _____

City, State, Zip: _____

Dear Member,

Monitoring inactive accounts is an important part of our efforts to prevent fraud.

A recent review of our records showed that **your credit union account has been inactive since this date:**

Accounts that have no activity for 12 months (such as a deposit or withdrawal) are considered inactive and subject to a \$5 dormant account fee (charged quarterly) if the balance is less than \$500.

Your ongoing relationship is important to us. **If you wish to keep your account active and avoid a possible dormant account fee, please sign and date the bottom of this letter and return it to us.**

Email: info@catholicunitedCU.org, **Fax:** 651-865-6551, or **US Mail:** Catholic United Financial Credit Union, 3499 Lexington Ave N, Saint Paul, MN 55126

Sincerely,

Member Services

PLEASE REACTIVATE MY CATHOLIC UNITED FINANCIAL CREDIT UNION ACCOUNT

ACCOUNT: _____

NAME: _____

By signing this form, I acknowledge that I want to keep this account open, will review my monthly or quarterly statements, and promptly notify the credit union of any unauthorized activity. By returning this form, I understand that my account will be considered active for another 12 months. After that time, I must make a deposit or withdrawal to keep my account active or my account will become inactive and I will again be subject to a dormant account fee if my balance is below \$500.

SIGNATURE: _____

DATE: _____