

First Lincoln

Federal Credit Union

Trust In Tradition

Fourth Quarter 2018

5730 R Street

Lincoln, NE 68505

(402) 466-4040

www.firstlincoln.org

Need A Little Holiday Help?

HOLIDAY LOAN SPECIAL



\$1200 for 12 Months at 7.95% APR

* With Approved Credit.
APR = Annual Percentage Rate
Payments approx. \$104.35 per month.
Offer good through January 15, 2019.

**JOIN US FOR THESE
INTERNATIONAL CREDIT UNION WEEK EVENTS!
OCTOBER 14-20, 2018**



*All Week in the Lobby
Cookies & Refreshments
Available.*

Enter Your Name into a
Drawing For Husker
Merchandise.



THANK YOU To Our Member-Owners!



FREE Halloween Bag

**Kids 12 and Under:
Visit First Lincoln FCU During
The Month of October For a
Trick-or-Treat Bag.**

While supplies last. One Per Child.

Holiday Giving

**November 1st
Through
December 8th**

First Lincoln FCU will be hosting a Holiday Giving Tree this season. To participate, choose an item from the holiday wish list and return it unwrapped to the credit union before



December 8th. Items

purchased will benefit the needs of a deserving Lincoln non-profit organization. Friendship Home exists to support, shelter, and advocate for women and children who are victims of domestic violence.



Letters From Santa

Send a Letter from Santa to a Special Boy or Girl for Only \$3.00. Get your form at First Lincoln and return it by November 9th. Letters will be mailed on December 5th. All Proceeds Benefit the Children's Miracle Network.



Your Holiday Club Account

During the months of October, November, and December, you will not be charged a fee for any of the following actions on your holiday account:

- ** Transfer to your FLFCU checking account**
- ** Withdrawal the funds in person**
- ** Request a check via phone**

For assistance or questions, please call (402) 466-4040

Holiday Skip-A-Payment Application

A review fee of \$15.00 is required to process this request.

Fee Enclosed? Yes No, Please Take Fee From Suffix: _____

Acct No. _____ Loan No. _____

Pmt. Amount _____ Home Phone _____ Work Phone _____

Name _____

Address _____

City, State, Zip _____

This form must be received by the Loan Department at least 10 days prior to payment due date



P.O. Box 5872 Lincoln, NE 68505
(402) 466-4040

The undersigned hereby makes written request to FLFCU to extend the original payment of my loan by permitting the next regular payment due to be extended one month after the termination date of the existing loan contract. This extension in no way otherwise alters the terms and conditions of the original loan contract as previously disclosed to the borrower. **Interest at the agreed rate will continue to accrue on the unpaid balance of the loan.**

Pmt. Date Skipped: _____ Next Due Date: _____

Signature _____ Date _____

Signature (If Cosigner) _____ Date _____

All Borrowers/Guarantors who signed the original agreement must sign this form. All Line of Credit and Real Estate Loans are not eligible for this offer. Loan must be in effect for a minimum of twelve months prior to applying for a skip payment.

Office Use:	Fee Processed: Cash By: _____ Suffix _____	CASH PRD AOCB TRCH PMT Set To Restart _____/_____/____	PMT Processed By: _____	Confirmation: _____/_____/____ Mail _____ Phone _____ In Person _____	By: _____
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