



Basic Check Order Form

**Please speak to a KEMBA representative regarding the current pricing for Basic Checks as this fee will be drafted from your account after ordering checks.*

I would like KEMBA Basic Duplicate Checks

Account Number _____ (Include Check Digit)

Name(s): _____

Address: _____

Phone: (____) _____ - _____

Start Number: _____

List any special instructions here: _____

***Please verify all of the above information is correct and fax this form to 540-387-2854 or mail it to one of the addresses below.**

Signature

Date

Return To KEMBA:
via email: info@kembafcu.org **via text:** 540-525-0931
via fax: 540-387-0664
2812 West Main Street ♦ Salem, VA 24153 ♦ 800-735-3622 3403
Candlers Mtn Road ♦ Lynchburg, VA 24502 ♦ 434-846-3393