

Furlough Relief Line of Credit

We're here to help you manage your finances until your payroll is back on schedule.



Our **Furlough Relief Line of Credit** is designed for eligible members¹ who are experiencing a furlough from their current employer or not receiving pay while working during a government shutdown.

HOW IT WORKS:

- Provide a copy of your furlough notice or proof of employment from your affected department.²
- Maximum credit line is \$4,000.³
- Repayment: 0.00% APR⁴ initial rate during the 60-day draw period. Thereafter, the monthly payment will be fixed based on the remaining balance for 36 equal payments at 4.00% APR.⁴

CONTACT US TODAY

We are here to answer your questions and help you apply for the Furlough Relief Line of Credit.

In person: US Capitol Branch, Room H-129
Ford Branch, Room 195
Longworth Branch, Room B-203
Rayburn Branch, Room SW-1
Oakton, VA Branch, 10461 White Granite Drive

Phone: 800.491.2328
703.934.8300

Email: email@congressionalfcu.org

   **Apply today!**

THE CAPITOL | LONGWORTH | FORD | RAYBURN | OAKTON, VIRGINIA
FROM CAPITOL HILL, 6-3100 | 800.491.2328 | 703.934.8300

www.CongressionalFCU.org FEDERALLY INSURED BY NCUA

1 Contact Congressional Federal Member Services for more information on eligibility to join the credit union or visit our website at: <http://www.congressionalfcu.org/membership>.

2 Proof of employment may include a pay stub or other forms of employment identification.

3 Approval is subject to a review of your credit file and all applicants may not qualify. Credit score will determine line of credit amount, within individual aggregate unsecured credit limits.

4 APR = annual percentage rate. A \$4,000 remaining balance at 4.00% APR for 36 months would have a monthly payment of \$119.



Here for the Hill. **Here for You.**

FURLOUGH RELIEF LINE OF CREDIT PRE-QUALIFICATION FORM*

Member of Congressional Federal Credit Union: Yes No

(If not, see below under **Not Yet a Member**)

Name:		
Address:		
City:	State:	Zip:
Phone Number:	Date of Birth:	
Email Address:		
Account Number:	Last 4 Digits of SSN:	
Gross Monthly Salary:		
You promise that everything you have stated in this application is correct to the best of your knowledge. If there are any important changes you will notify us in writing immediately. You authorize the Credit Union to obtain credit reports in connection with this application for credit and for any update, increase, renewal, extension or collection of the credit received. You understand that the Credit Union will rely on the information in this application and your credit report to make its decision. If you request, the Credit Union will tell you the name and address of any credit bureau from which it received a credit report on you. It is a federal crime to willfully and deliberately provide incomplete or incorrect information in this application.		
Signature:	Date:	

*See page one for line of credit terms and eligibility criteria.

NOT YET A MEMBER OF CONGRESSIONAL FEDERAL CREDIT UNION?

Membership is just a click away. Simply check to see if you qualify, then fill out a membership application at one of our branches, call member services at 800.491.2328 or apply online:

<http://www.CongressionalFCU.org/Membership>

You are immediately eligible to join if you qualify for membership in one of three ways:

- If you work for the U.S. House of Representatives **OR**
- If you are an employee with one of our 100+ Select Employee Groups (SEGs). Members and students of SEGs may qualify as well. Go to our website for a complete listing of SEGs **OR**
- If you are a family member of an existing member. Family members are defined as spouses, children, siblings, parents, grandparents, grandchildren, and those persons living in the same household and maintaining a single economic unit. Please be sure to indicate family member eligibility on your application.

  **Apply now!**

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