



4401 Theater Drive • P.O. Box 5129 • Evansville, IN 47716-5129  
 Toll Free: 1-800-800-9271 • Fax 812-473-9704

06-06-2025

[REDACTED]

Attn: [REDACTED]

Subject: Acct Nbr: [REDACTED]  
 Borrower(s): [REDACTED]

Collateral: 2021 CADILLAC ESCALADE VIN- [REDACTED]

Dear [REDACTED]

The amount needed to fully satisfy the above loan on 06-06-2025 is 33,656.19 .

The following table describes the payoff amount in detail:

Balance Description	Due Credit Union	Due Member	Per Diem After 06-06-2025
Note Interest	62.12		2.49
Note Balance	33,594.07		
<b>Totals</b>	<b>33,656.19</b>	<b>0.00</b>	



Payment  
42

Account Number

[REDACTED]

Due Date  
JUL 12 2025

Amount Due  
1,503.19

After This Date  
JUL 22 2025

Pay This Amount  
1,528.19

LIBERTY FCU  
4401 THEATER DR  
EVANSVILLE IN 47715-1967

Date Paid \_\_\_\_\_

Amount Paid \_\_\_\_\_

Check Number \_\_\_\_\_

[REDACTED]

Additional Amounts

Principal \$ \_\_\_\_\_

Escrow \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

Total \$ \_\_\_\_\_

Change Of Address for Account

[REDACTED]

Name [REDACTED]

Old Information

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

SSN \_\_\_\_\_

Phone \_\_\_\_\_

New Information

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

SSN \_\_\_\_\_

Phone \_\_\_\_\_

Signature \_\_\_\_\_