

### AUTOMATIC TRANSFER AUTHORIZATION

Member Name: \_\_\_\_\_ Member Number: \_\_\_\_\_

Request Date: \_\_\_\_\_  NEW  UPDATE  CANCEL

**I/We authorize the Credit Union to transfer funds from my account(s) on the due date of my loan(s) as specified below:**

Monthly  Bi-Weekly  Weekly  Other \_\_\_\_\_

**Total amt to transfer: \$** \_\_\_\_\_ **From Acct #:** \_\_\_\_\_ **Date of 1<sup>st</sup> transfer:** \_\_\_\_\_

Amount: \$ _____	From Suffix _____	To Loan Account No. & Suffix: _____ - _____
Amount: \$ _____	From Suffix _____	To Loan Account No. & Suffix: _____ - _____
Amount: \$ _____	From Suffix _____	To Loan Account No. & Suffix: _____ - _____
Amount: \$ _____	From Suffix _____	To Account No. & Suffix: _____ - _____
Amount: \$ _____	From Suffix _____	To Account No. & Suffix: _____ - _____
Amount: \$ _____	From Suffix _____	To Account No. & Suffix: _____ - _____

Special Instructions: \_\_\_\_\_

I/We understand it is my/our responsibility to maintain a balance in my/our account sufficient to enable the transfer of the **“Total amt to transfer”** indicated above. If sufficient funds are not available, a partial amount will be transferred in any order determined by the Credit Union. These transfers will continue until I notify the Credit Union in writing to cancel or update the transfer or if the Credit Union notifies me the transfer will be discontinued. The Credit Union must receive the written request for cancellation 7 days prior to a scheduled transfer.

Signatures: \_\_\_\_\_

### PAYROLL DEDUCTION FORM

Member Name: \_\_\_\_\_ Member Number: \_\_\_\_\_

Employer/Deposit Name: \_\_\_\_\_

Have deposits come into the Credit Union before?  Yes  No If Yes, when: \_\_\_\_\_

I authorize the Credit Union to divide my deposit into the following suffixes and in the following amounts:

	Current Deduction Amt	New Deduction Amt
Suffix _____ Savings	\$ _____	\$ _____
Suffix _____ Checking	\$ _____	\$ _____
Suffix _____ Vacation Club	\$ _____	\$ _____
Suffix _____ Holiday Club	\$ _____	\$ _____
Suffix _____ Special Share	\$ _____	\$ _____
Suffix _____ IRA	\$ _____	\$ _____
Suffix _____ Other	\$ _____	\$ _____
Suffix _____ Other	\$ _____	\$ _____
Suffix _____ Other	\$ _____	\$ _____

<b>Credit Union Use Only</b>
Date: _____
Initials: _____

Member Signature \_\_\_\_\_ Date: \_\_\_\_\_