



P.O. Box 958471 • Lake Mary, FL 32795-8471
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OVERDRAFT PROTECTION WORKSHEET

Member Name: _____ Account #: _____ Suffix _____

I decline Overdraft Protection on my Checking Account

Members may choose to have overdraft protection for their checking account, as well as their money market account (if applicable). If you would like to set up overdraft protection from a different account number, you must first complete the Cross Account Transfer Authorization form. If you wish to have overdraft protection, please indicate below which sub-account you would like overdraft protection to come from, as well as the priority order you would like overdraft protection to occur.

I knowingly, affirmatively, and unequivocally give my consent to the credit union to use funds from any Social Security or Supplemental Security Income (SSI) benefits directly deposited into my account for overdraft protection described herein.

Overdraft protection from this account:

Priority:	Suffix:	Amount + Fee
_____ Share	_____	Difference + \$3.00
_____ HSA Share	_____	Difference + \$3.00
_____ PLOC	_____	Incremental of \$50.00
_____ Money Market	_____	Difference + \$3.00
_____ Summer Savings	_____	Difference + \$3.00
_____ Holiday	_____	Difference + \$3.00
_____ HELOC	_____	Difference

Overdraft Protection from a different account: (A Cross Account Transfer Authorization form must be completed.)

Account Number: _____ (different from above)

Priority:	Suffix:	Amount + Fee
_____ Share	_____	Difference + \$3.00
_____ HSA Share	_____	Difference + \$3.00
_____ PLOC	_____	Incremental of \$50.00
_____ Money Market	_____	Difference + \$3.00
_____ Summer Savings	_____	Difference + \$3.00
_____ Holiday	_____	Difference + \$3.00
_____ HELOC	_____	Difference

Note: Savings and Money Market Account Limits – Only six (6) transactions allowed per month via debit card, check, ACH, overdraft protection, or by phone with a team member. Unlimited withdrawals or transfers permissible via online banking, mobile banking, automated telephone, ATM or branch.

Member Signature

Date

Credit Union Use Only:

User Name: _____ Branch: _____ Date: _____