



Addition Financial Credit Union
Automatic Transfer Form

Credit Union Account Number: _____ Date: _____

Member Name: _____ Teller Number: _____ Branch: _____

Please complete Section A OR Section B. Review each description and choose the type of transfer being authorized.

- Input boxes for New Automatic Transfer, Cancel Automatic Transfer, and Modify Automatic Transfer.

SECTION A

Complete this section for monthly transfers to occur on the 1st, 5th, 10th, 15th, 20th, or 25th. The transfer will be posted for the specified dollar amount on the specified date each month.

Transfer Start Date (Please select) [] 1st [] 5th [] 10th [] 15th [] 20th [] 25th

Transfer funds from Account _____ Suffix _____

Transfer funds to Account _____ Suffix _____

Amount to transfer \$ _____ Effective Date _____

Member Signature _____ Date _____

SECTION B

Complete this section to authorize and request Addition Financial Credit Union to transfer loan payment(s) from an account. The amount of the loan transfer will reflect the amount of the monthly payment DUE on the loan. For loans with partial payments, only the amount required to advance the due date will be transferred.

I hereby authorize and request Addition Financial Credit Union transfer my loan payment(s) from my:

Account # _____ Suffix _____ each month starting _____ and every month thereafter as follows:

Loan - Suffix # _____ Amount \$ _____

Loan - Suffix # _____ Amount \$ _____

Loan - Suffix # _____ Amount \$ _____

This authorization shall remain in force until there is a written revocation signed by me in accordance with the regulations of the credit union.

Member Signature _____ Date _____

Accounting Use Only: Processed By _____ Date _____

Reason for Review _____

Contact Center Use Only: Date _____ Time _____

Doc Status: ACCTG - EFT PENDING