AUTHORIZATION FOR AUTOMATIC TRANSFER



☐ Ne	ew _	Update	☐ Cancellati	on		
TRANSFER FROM						
AMOU	JNT MEMI	BER NAME	MEMBER #	DATE	ID	ACCOUNT DESCRIPTION
1 \$						
2 \$						
3 \$						
4 \$						
5 \$						
FREQU	ENCY					
	onthly [☐ Semi-Monthly	☐ Weekly			
	•		_ ,			
_ •	i-Weekly [_ Quarterly	U Other			
TRANSFER <u>TO</u>						
AMOU	JNT MEM	BER NAME	MEM	BER#	ID	ACCOUNT DESCRIPTION
1 \$						
2 \$						
3 \$						
4 \$						
5 \$						
instruction I understa ownership	ns. It is my respons nd and agree that o rights in such fur es any previous tra	sibility to ensure that ad upon transfer of funds t nds (unless I am named a	equate funds exist from account to ar account owner on	in the account on a ny account(s) listed the account receivi	the scheduled above, I shall r ing the transfe	
Member N	lame					
Member S	ignature X				Date	
For Office	Use Only					
Date I	Processed	F	Processed By		U	ser ID #