

AUTHORIZATION FOR AUTOMATIC TRANSFER



Credit Union of
Southern California
BUILDING BETTER LIVES[®]

New Update Cancellation

TRANSFER FROM

AMOUNT	MEMBER NAME	MEMBER #	DATE	ID	ACCOUNT DESCRIPTION
1 \$					
2 \$					
3 \$					
4 \$					
5 \$					

FREQUENCY

Monthly Semi-Monthly Weekly
 Bi-Weekly Quarterly Other _____

TRANSFER TO

AMOUNT	MEMBER NAME	MEMBER #	ID	ACCOUNT DESCRIPTION
1 \$				
2 \$				
3 \$				
4 \$				
5 \$				

I hereby authorize Credit Union of Southern California (CU SoCal) to perform the share transfer(s) above in accordance with my instructions. It is my responsibility to ensure that adequate funds exist in the account on the scheduled transfer dates.

I understand and agree that upon transfer of funds from account to any account(s) listed above, I shall relinquish any and all ownership rights in such funds (unless I am named account owner on the account receiving the transfer of funds). This authorization supersedes any previous transfer authorizations and shall remain in effect until a written request to update or cancel is submitted by me to CU SoCal.

Member Name _____

Member Signature X _____ Date _____

For Office Use Only		
Date Processed	Processed By	User ID #