

OVERDRAFT AUTHORIZATION | CU SoCal **COURTESY PAY**

On Everyday DEBIT CARD Transactions



Credit Union of
Southern California
BUILDING BETTER LIVES®

I/we understand about the benefits of CU SoCal COURTESY PAY and wish to select the following options listed below. Please check all that apply.

☐ **YES.**

I authorize CU SoCal to pay overdrafts on my everyday DEBIT CARD transactions via Courtesy Pay on the accounts I selected below. I understand that my account will be charged a \$29 fee each time an overdraft is paid. I understand there is no limit on the total fees I can be charged for overdrawing my account.

- | | |
|---|-----------------|
| <input type="checkbox"/> CHECKING | Account # _____ |
| <input type="checkbox"/> SAVINGS/SHARE | Account # _____ |
| <input type="checkbox"/> SECONDARY SAVINGS/SHARE | Account # _____ |
| <input type="checkbox"/> MONEY MARKET | Account # _____ |

☐ **NO.**

I do NOT want CU SoCal to pay overdrafts on my everyday DEBIT CARD transactions via Courtesy Pay on the following accounts:

- | | |
|---|-----------------|
| <input type="checkbox"/> CHECKING | Account # _____ |
| <input type="checkbox"/> SAVINGS/SHARE | Account # _____ |
| <input type="checkbox"/> SECONDARY SAVINGS/SHARE | Account # _____ |
| <input type="checkbox"/> MONEY MARKET | Account # _____ |

☐ **I want to OPT-OUT of the CU SoCal Courtesy Pay Program completely.**

I understand that in the event any CHECKS, DEBIT Card and/or ACH transactions are not cleared due to insufficient and/or unavailable funds in my/our account, I/we agree that I/we are responsible for any fees assessed by Credit Union of Southern California (CU SoCal) and other parties.

X _____

Signature

Print Name _____ Date _____

Account # _____

Primary Account Holder's email _____

IF YOU HAVE ADDITIONAL ACCOUNTS that you want us to authorize and pay overdrafts on everyday debit card transactions, please print additional copies of this page.