

Authorization for Automatic Transfer

New

 Update

 Cancellation

TRANSFER FROM

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

FREQUENCY

Monthly Semimonthly Weekly
 Bi-Weekly Quarterly Other _____

TRANSFER TO

| | MEMBER # AND NAME | ID | ACCOUNT DESCRIPTION |
|---|-------------------|----|---------------------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |

I hereby authorize Credit Union of Southern California, a Federal Credit Union (CU SoCal) to perform the following share transfer(s), 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 _____
Date

Date of Request: Request taken by: User #: