USALLIANCE FINANCIAL®

411 Theodore Fremd Avenue • Suite 350 • Rye, NY 10580-1410 • 800.431.2754 • USAlliance.org

Agreement for Automatic Transfers FROM My Credit Union Account

Authorize automatic transfers for a regular fixed amount from your Savings or Checking to an account at another financial institution. (Reminder: Savings Accounts are limited to six withdrawals per calendar month.) Once authorized, these transfers will occur automatically on the same day (or, if it is not a business day, on the next business day). Just complete the Agreement for Automatic Transfers from My Credit Union Account and return it to USAlliance Financial, 411 Theodore Fremd Avenue, Suite 350, Rye, NY 10580-1410.

☐ New agreement   ☐ Cancel agreement   ☐ Update existing agreement*

* I understand an updated agreement will supersede all information on an existing agreement

Name of Financial Institution Funds Will Be Transferred TO:

Its ABA/EFT Routing Number:	Your Account Number at That Institution: ☐ Checking ☐ Savings

Transfer Amount: $	Specify Frequency:	Start Date:

Your Name as Owner of "FROM" Account (Please Print):

FROM my USAlliance Account Number:

Your Signature as Owner of "FROM" Account:	Date:

PLEASE ATTACH A VOIDED CHECK

If applicable, I will be charged a fee according to the Credit Union's published schedule for this service. I understand that if sufficient funds are not available on the scheduled date I may be charged a fee by both the Credit Union and the other Financial Institution.

ELECTRONIC FUNDS TRANSFER (EFT) AGREEMENT

On the above application, you have authorized USAlliance Financial (Credit Union) to initiate entries to and from your account from another Financial Institution and you have requested the Financial Institution to accept any entries initiated by the Credit Union on such account and to post the same to such account without responsibility for corrections thereof or for the existence of any further authorization relating to them.

This authority will remain in full force and effect until the Credit Union has received written notice of its termination in such time or manner as to afford reasonable time to act upon it.

It is understood that all entries initiated by the Credit Union pursuant to this agreement shall be subject to the terms and conditions of the Electronic Funds Transfer Disclosure which follows.

FOR CREDIT UNION USE

Effective Date_____ Processed By_____ Date:_____