



Use this form to TRANSFER FUNDS from another financial institution to your credit union savings, checking, or loan account.

ACH DIRECT TRANSFER AUTHORIZATION

Authorization to Withdraw Funds from another Financial Institution

When you take advantage of automated transfers, you save time and reduce the risk of a missed payment or transfer. Use automated transfers to:

- qualify for a discount on most loans
- make loan payments
- build your savings or checking balance.

Name _____

1 I'd like to: begin a new direct transfer update my existing direct transfer cancel my direct transfer

2 This request should take effect starting _____ (month, day, year)

3 The withdrawal will come from _____ (name of financial institution)

Checking: a voided check from the other financial institution must be attached

OR

Savings, account number _____ 9-digit routing number _____

4 Deposit the funds to my Inspirus Credit Union account, number _____ as instructed below.

<input type="checkbox"/> Deposit to Savings/Checking, sub # _____ Transfer amount: \$ _____	<input type="checkbox"/> Quarterly on this date: _____	<input type="checkbox"/> Semimonthly on these two dates: _____
	<input type="checkbox"/> Monthly on this date: _____	_____
<input type="checkbox"/> Payment to Loan # _____ Transfer amount: \$ _____	<input type="checkbox"/> Biweekly (M T W TH F) on this day: _____	<input type="checkbox"/> Weekly (M T W TH F) on this day: _____
	<input type="checkbox"/> Monthly on this date: _____	<input type="checkbox"/> Semimonthly on these two dates: _____
	<input type="checkbox"/> Biweekly (M T W TH F) on this day: _____	<input type="checkbox"/> Weekly (M T W TH F) on this day: _____

Additional transfers (optional)		
<input type="checkbox"/> Deposit to Savings/Checking, sub # _____ Transfer amount: \$ _____	<input type="checkbox"/> Quarterly on this date: _____	<input type="checkbox"/> Semimonthly on these two dates: _____
	<input type="checkbox"/> Monthly on this date: _____	_____
<input type="checkbox"/> Payment to Loan # _____ Transfer amount: \$ _____	<input type="checkbox"/> Biweekly (M T W TH F) on this day: _____	<input type="checkbox"/> Weekly (M T W TH F) on this day: _____
	<input type="checkbox"/> Monthly on this date: _____	<input type="checkbox"/> Semimonthly on these two dates: _____
	<input type="checkbox"/> Biweekly (M T W TH F) on this day: _____	<input type="checkbox"/> Weekly (M T W TH F) on this day: _____

Please note: Transfers to loans are stopped automatically when a loan has been paid in full.

I hereby authorize Inspirus Credit Union (the credit union) to withdraw funds, and make corrections if necessary, for the transfers to my account(s) indicated above. If the funds are unavailable, it will be my responsibility to arrange payment. If the funds are unavailable for three (3) consecutive transfers, the credit union may cancel the above agreement. When the transaction date falls on a weekend or holiday, the transaction will be made the following business day. My monthly statement will serve as my receipt. This authorization will remain in full force and effect until a loan is paid in full or until the credit union has received a written cancellation request from me in such time and manner as to afford the credit union and the other financial institution a reasonable opportunity to act on it.

5 Signature _____ Daytime Phone (_____) _____ Date _____

6 After filling out this form, return it to: Inspirus Credit Union, P.O. Box 576, Seattle, WA, 98111-0576 OR via fax at (206) 676-3690 OR submit the form electronically via Online Banking. Just select "ACH Direct Transfer Form" under the "Additional Services" tab. Please allow five business days for processing of your request.