CONGRESSIONAL FEDERAL CREDIT UNION

Transfer Authorization

To transfer funds from your account at another financial institution to Congressional Federal, please complete this form and fax it to 703.218.4062; or mail it to P.O. Box 23267, Washington, D.C. 20026-3267; or visit a Credit Union branch.

MEMBER INFORMATION

Member Name:

Phone Number:

Credit Union Account Number:

Credit the transfer to my: *(Select one)*
〇 Savings   〇 Checking   〇 Money Market   〇 Loan

WITHDRAW FUNDS FROM THE FOLLOWING INSTITUTION:

Institution Name:

Institution Address: City/State:

Institution Phone Number:

Name as it Appears on the Account:

Account Number: 〇 Savings   〇 Checking

ABA Routing Number: _ _ _ _ _ _ _ _ _

*(*The "ABA Routing Number" is the first nine digits listed at the bottom of your check. Please attach a voided check so we may verify this number.)*

WITHDRAWAL INFORMATION

Select a date for the monthly withdrawal: Day of Each Month   〇 One Time Only

Date of First Withdrawal: /   /   Amount: $

I authorize Congressional Federal to regularly withdraw funds from my account at the financial institution indicated above to be applied to my account at Congressional Federal Credit Union. I understand that if I choose the ONE TIME ONLY option that the requested amount will not be available for three (3) business days when posting to a share account. I understand that, if the scheduled withdrawal date falls on a weekend or holiday, then the transfer will not be made until the following business day.

I understand that the process will continue until the Credit Union has received written notification from me to cancel this transaction. Changes or terminations must be in writing and delivered to the Credit Union no later than three business days prior to the next withdrawal date. The Credit Union has the right to make appropriate adjustments if any errors occur with the transmission of funds, and has the right to revoke this agreement at any time.

I understand that a fee of $25.00 will be charged to my account if this transaction is returned.

Member Signature: Date: