![ep FEDERAL CREDIT UNION]

A better environment for your money.®

e-Transfer Request Form
AUTHORIZATION AGREEMENT FOR PREAUTHORIZED TRANSACTIONS

e-Transfers generally take 2-3 business days to complete. Forms must received by 9 a.m. for the transfer to be initiated the same business day.
There is a maximum daily withdrawal limit of $2,500 for e-Transfers.

I _____ hereby authorize EPFCU to initiate **credit / debit** (circle one) entries
to / from (circle one) my account at the financial institution named below.

FINANCIAL INSTITUTION NAME _____

ROUTING TRANSIT/ABA NO. _____ _____ _____ _____ - _____ _____ _____ _____ - _____

ACCOUNT NAME _____

ACCOUNT NO. _____   **Savings** / **Checking**
(Attach voided check if applicable)   ☐   ☐

> **For Credit Entries to the Above Account**
> If you are authorizing EPFCU to initiate *credit* entries to the account specified, complete the following:
> Please debit my account at EPFCU:
>
> ACCOUNT NAME: _____
>
> ACCOUNT NO.: _____   SUFFIX: _____

> **For Debit Entries from the Above Account**
> If you are authorizing EPFCU to initiate *debit* entries from the account specified, complete the following:
> Please credit my account at EPFCU:
>
> ACCOUNT NAME: _____
>
> ACCOUNT NO.: _____   SUFFIX: _____

This recurring/non-recurring (circle one) transaction is to begin on _____ (date)

and occur _____ (frequency and/or dates) thereafter in the amount of $ _____.

This authorization is to remain in full force and effect until EPFCU has received written notification (within 10 days) from me of
its termination in such time and in such manner as to afford EPFCU a reasonable opportunity to act on it.

NAME(S)_____ DATE: _____

SIGNED: _____ PHONE NO.: _____

**** In the event that this deduction is returned to EP Federal Credit Union as an NSF item, a second attempt to collect the funds will be made. If the
deduction is returned a second time, the credit to the account with EP Federal Credit Union will be reversed. ****

** The Credit Union, at its discretion, may terminate this agreement due to excessive NSF transactions. **

****Please attach voided check if applicable****

e-Transfers are only allowed for automated credit or debit transactions between your EPFCU account and your other financial institutions.
To transfer funds to another person, or to pay a bill, please use EPFCU's **ep**Online Bill Payment.

CREDIT UNION USE ONLY	Teller #_____
Added to System By: _____	Verified By: _____
Date: _____	Date: _____

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