

Member Authorization for Automatic Payments to Loan



Account Number: _____ Loan Number: _____

- No, I would not like an automatic transfer to my loan from my account, paycheck, or other financial institution.
- Yes, I would like an automatic transfer to my loan from:

PAYROLL DIRECT DEPOSIT

Amount per Deposit: \$ _____ Name of Employer _____

The system will not automatically update if I change jobs, or the deposit is sent with a different name. I understand that I am responsible for notifying EPFCU of a payroll deposit change.

AUTOMATIC TRANSFER

Amount per Transfer: \$ _____ Account Number _____ Suffix _____

Day(s) of the month _____ Weekly/Biweekly _____ Day of the Week _____

Beginning Date ____/____/____

ACH FROM ANOTHER FINANCIAL INSTITUTION

Withdraw Funds from _____ (Financial Institution)

Savings Checking Amount \$ _____ Starting Date ____/____/____

Deposit funds to _____ (Financial Institution)

Savings Checking EPFCU Account and Loan # _____

ATTACH A VOIDED CHECK

Account Number _____

Name(s) on Account _____

Transit/ABA # _____ Branch _____

As the member, I understand that my loan payment is my responsibility. Automatic payments are a courtesy offered by the credit union, and I am responsible for checking that all payments are made correctly.

Signature _____ Printed Name _____

Loan Officer Initials _____ Date ____/____/____