

Revised 8/24/2018

Automated Funds Transfer Request - External Withdrawal Agreement

Mail to: P.O. Box 60890, Los Angeles, Fax to: (323) 550-2210 CA 90060 (800) 231-1626 Last Name: Member First Name: Email: ______ Member Number: Please delete this transfer This is a new transfer request This is a change request Amount Firefighters First Account Number payment sequence* Transfer funds to my: *Loan payments only: payment sequence will transfer total due to bring the Loan loan current based on the loan due date and amount may change monthly This transaction should happen: Checking bi-weekly semi-monthly one-time weekly monthly Savings Starting on* Ending on *Must be received at least 10 business days prior to transfer date Name of my other financial institution: My other financial institution's routing number (9 digits): Account Number (up to 17 digits) Name on Account: Choose One: pull funds from a savings account at another institution pull funds from a checking account at another institution (attach a voided check) ACH Disclosure I/We hereby authorize Firefighters First Credit Union to initiate debit entries (and/or corrections to a previous entry) to the account indicated above. This authority is to remain in full force and effect until Firefighters First Credit Union has received written notification (no less than 10 days prior to transfer date). I/We acknowledge that the origination of ACH transactions to my/our account must comply with the provisions of U.S. law. I am fully responsible for the information provided on this request and understand my other financial institution may impose charges, for which I/we are responsible. Where ACH transfers are made for the transfer of making loan payments, the monitoring of the amount requested, the loan balances, the final payoff amount, and the cancellation of the ACH Agreement are my responsibility. The Credit Union is not liable for transfers made or any costs I may incur in the event that the ACH Agreement is not canceled at the time a loan is paid off. Any excess amount transferred will be posted to my regular share account. Please refer to Firefighters First Credit Union's Truth in Savings for further disclosures and schedule of fees. BY SIGNING THIS FORM, I ACKNOWLEDGE THAT ALL INFORMATION IS TRUE AND ACCURATE. Member's Signature Date For Credit Union Use Only: Date Rec'd Accepted by: Signature Verified by: