



Automated Funds Transfer Request - External Withdrawal Agreement

Mail to: P.O. Box 60890, Los Angeles,
CA 90060 (800) 231-1626

Fax to: (323) 550-2210

Member Name: _____ Phone _____

Member Number: _____ Email _____

☐ This is a new transfer request ☐ This is a change request ☐ Please delete this transfer

Amount _____

or ☐ pmt seq *

* Loan payments only - payment sequence will transfer total due to bring the loan current based on the loan due date and amount may change monthly

This transaction should happen:

☐ one-time ☐ weekly ☐ monthly ☐ bi-weekly ☐ semi-monthly

Firefighters First Account Number

Transfer funds to my:

☐ Loan _____

☐ Checking _____

☐ Savings _____

Starting on *

Ending on

* Must be received at least 3 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:

Accepted by: _____ Date Rec'd _____ Signature Verified by: _____