P.O. BOX 67013
HARRISBURG, PA 17106-7013
FAX **717.772.2272**

AUTHORIZATION FOR RECURRING TRANSFERS TO ANOTHER MEMBER ACCOUNT

REMINDER: Transfer Authorizations can be created, modified and deleted through online banking.

STEP 1: PLEASE COMPLETE THIS SECTION WITH YOUR ACCOUNT INFORMATION.

MEMBER NAME(s)_____

ADDRESS_____ CITY_____ STATE_____ ZIP_____

HOME PHONE _____ WORK PHONE _____ CELL/MOBILE _____

YOUR PSECU ACCOUNT NUMBER_____

STEP 2: I WOULD LIKE TO: (CHECK ONE)

☐ **STOP** transfer of $_____ from Share #_____ (1=Regular, 4=Checking, 7=Money Market)
to Account number _____ Account Owner(s) _____

☐ **START** transfer of $_____ from Share #_____ (1=Regular, 4=Checking, 7=Money Market)
to Account number _____ Account Owner(s) _____

STEP 3: WITH THESE FUNDS, I WOULD LIKE TO: (CHECK ONE)

☐ **PAY PSECU LOAN:** ☐ Visa® Classic Card ☐ Visa® Founder's Card ☐ Signature ☐ Auto (Loan # _____) ☐ Other _____

- ☐ Minimum Payment (According to Loan Payment Schedule) **-OR-**
- ☐ Alternate Amount of $_____ **-OR-**
- ☐ Amount to Avoid Finance Charge (Visa Classic Card or Visa Founder's Card ONLY) $_____

Date to Start _____

☐ **DEPOSIT TO PSECU SHARE #**_____ **SHARE TYPE:** ☐ Regular ☐ Checking ☐ Money Market ☐ Other _____

- ☐ Monthly
- ☐ Biweekly
- ☐ Semi Monthly (Circle One: 1st & 16th **-OR-** 15th & 31st)

Date to Start _____

STEP 4: PLEASE SIGN BELOW:

I understand that a form must be signed to **START** or **STOP** recurring transfers to other accounts. Change of amount or frequency can be made by calling **800.237.7328**. Please sign and return to the mailing address above.

ACCOUNT NUMBER _____ SIGNATURE _____ DATE _____

THIS CREDIT UNION IS FEDERALLY INSURED BY THE NATIONAL CREDIT UNION ADMINISTRATION. EQUAL OPPORTUNITY LENDER.

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