



This form is used to authorize Granite Credit Union to initiate transfers from other financial institutions. The origination is processed one business day before the effective date.

Withdraw funds from:

Financial Institution: _____ Routing #: _____ Account #: _____
Name on Account: _____ Account Type: [] Checking Account [] Savings Account

Transfer Information:

Transfer Amount: _____ ACH Effective Start Date: _____
Frequency: Choose one and select date(s)
[] Monthly _____ Except 29,30 & 31 [] Semi-Monthly _____ & _____
[] Weekly [] Bi-Weekly _____

NOTE: If/when selected date falls on a holiday or non-processing day, the transfer will be made on the next business day.

Deposit funds to:

Financial Institution: _____ Routing #: _____ Account #: _____
Name on Account: _____ Account Type: [] Checking [] Savings [] Loan #: _____

Member Authorization:

I (we) authorize Granite Credit Union to initiate entries to/from the accounts as indicated above. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law. This authorization is to remain in full force and effect until Granite Credit Union has received written notification from me (us) of its termination at least three (3) business days prior to the scheduled date or transfer as to afford Granite and the other Financial Institution a reasonable opportunity to act on it. This authorization may be unilaterally terminated by the Credit Union in cases of excessive returns, member abuse or whenever any loans have been paid in full with the recurring debits.

* GFCU has the right to terminate or suspend the agreement for breach of the NACHA rules in a manner that permits the credit union to comply with these Rules; and the right to audit the Originator's compliance with the Origination Agreement and these Rules.

Name: _____ Contact #: _____ Date: _____

Signature: _____

For Office Use Only: (GCU Employee)

Filled out by: _____ Teller ID _____

For Office Use Only: (Electronic Services Employee)

Entered by: _____ Verified by: _____ Date: _____