



ACH AUTHORIZATION

(To debit/credit an account at another institution)

Member Name:		RCU Member #
This Authorization is (check one) New Change Cancel	Amount(s) of Transfer 1) \$ 2) \$ 3) \$	Account types/IDs 1) 2) 3)
<p>Check One:</p> <p style="padding-left: 40px;">Deposit – transfer funds from another institution to my RCU account</p> <p style="padding-left: 40px;">Withdrawal – transfer funds from my RCU account to my account at another institution</p>		
Name of other financial institution		Routing or ABA number
Account number at other FI	Account type (check one) Checking Savings Loan	Payment Template (check one) One-Time Only (\$5 fee) Mondays Fridays 4 th monthly 15 th monthly 30 th monthly 15 th & 30 th monthly
Effective Date or Start Date		
Credit Union Representative		Date

I hereby authorize Riverview Credit Union to transfer funds, as listed above, between my account at RCU and my account at another financial institution, and if necessary to make adjustments for any errors. RCU will be responsible for the transfer of funds in accordance with this authorization.

All debits/credits must comply with U.S. law. They may be revoked within 60 days from settlement date. Any NSF or related fees will be electronically debited from your account.

Member Signature

Date

Note: The receiver may revoke this Debit or Credit Authorization by completing a Written Statement Under Penalty of Perjury Form.