



**Central Florida Educators' Federal Credit Union  
Automatic Transfer Form**

**Credit Union Account Number** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Member Name:** \_\_\_\_\_ **Teller Number:** \_\_\_\_\_

Please complete section A **OR** section B. Review each description and choose the type of transfer being authorized.

**SECTION A**  
 Complete this section for monthly transfers to occur on the 1st, 5<sup>th</sup>, 10<sup>th</sup>, 15<sup>th</sup>, 20<sup>th</sup>, or 25<sup>th</sup>. The transfer will be posted for the specified dollar amount on the specified date each month.

Transfer Start Date (Please check)  1<sup>st</sup>  5<sup>th</sup>  10<sup>th</sup>  15<sup>th</sup>  20<sup>th</sup>  25<sup>th</sup>

Transfer funds from Account \_\_\_\_\_ Suffix \_\_\_\_\_  
 Transfer funds to Account \_\_\_\_\_ Suffix \_\_\_\_\_  
 Amount to transfer \$ \_\_\_\_\_.

\_\_\_\_\_  
 Member Signature \_\_\_\_\_ Date \_\_\_\_\_

**SECTION B**  
 Complete this section to authorize and request Central Florida Educators' Federal Credit Union to transfer loan payments(s) from an account. The amount of the loan transfer will reflect the amount of the monthly payment **DUE** on the loan. For loans with partial payments, only the amount required to advance the due date will be transferred.

I hereby authorize and request the Central Florida Educators' Federal Credit Union transfer my loan payment(s) from my:

a) Share Account (Savings) # \_\_\_\_\_ Suffix \_\_\_\_\_  
 b) Share Draft Account # \_\_\_\_\_ Suffix \_\_\_\_\_  
 each month starting \_\_\_\_\_ and every month thereafter as follows:

Loan – suffix	# _____	- _____	Amount	\$ _____
Loan – suffix	# _____	- _____	Amount	\$ _____
Loan – suffix	# _____	- _____	Amount	\$ _____

This authorization shall remain in force until there is a written revocation signed by me in accordance with the regulations of the credit union.

\_\_\_\_\_  
 Member Signature \_\_\_\_\_ Date \_\_\_\_\_