FUND/WIRE TRANSFER AGREEMENT

From time to time you may desire to initiate a fund transfer from authorized accounts held at the Credit Union. These fund transfers requests are called payment orders in this Agreement. This Agreement governs all payment orders you give us. MEMBER NO:		
MEMBER IDENTITY INFORMATION		
Member/Owner:	Day Phone No:	
Mailing Address:	City/State/	Zip:
ACCOUNTS SUBJECT TO THIS AGREEMENT		
The following authorized accounts are governed by this Agreement: Suffix	Suffix	Suffix
Share/Savings: Share Draft/Checking: Other: Other:		Other:
Other: Other		
SECURITY MEASURES		
The following security measures shall be used by the Credit Union for the purpose of verifying all payment order requests. The Credit Union will use the security measures checked below.		
Call Back Procedure - When we receive your payment order request, we will confirm the payment order by calling any of the contact persons authorized to verify transfers at the telephone number listed below:		
Contact Person #1:	Day Phone	No:
Contact Person #2:	Day Phone	No:
Contact Person #3: Day Phone No:		
Password - When verifying and authorizing a payment order you must give us your password which is:		
Other Security Measures:		
LIMITATIONS ON PAYMENT ORDERS		
You authorize the following checked limitations and criteria to be applicabl use the limitations checked below to process the fund/wire transfer.	e to each transaction	on covered by this Agreement. The Credit Union will
Frequency: You will make up to payment orders per	Other:	
Amounts: The maximum amount of any payment order is \$		
The minimum amount of any payment order is \$		
AUTHORIZATIONS		
You authorize the following persons to submit payment orders in your name unless and until you notify the Credit Union in writing of a change. As permitted by applicable state law, the Credit Union may rely on any actual or facsimile signature that reasonably resembles the signature of the Authorized Person provided below and will be entitled to honor and charge you for all such payment orders. You agree to assume liability for these transactions to the extent permitted under applicable state law.		
	Χ	
Authorized Person #1 (print) Title (if applicable)) Authorized Perso	on Signature
Authorized Dances (10 feetal)	X) Authorized Perso	Claration
Authorized Person #2 (print) Title (if applicable)	Authorized Perso	on Signature
Authorized Person #3 (print) Title (if applicable)	Authorized Perso	on Signature
The in applicable		on organization
Authorized Person #4 (print) Title (if applicable) Authorized Person Signature		
AGREEMENT		
This Fund/Wire Transfer Agreement ("Agreement") governs the procedures and responsibilities concerning payment orders initiated by the Account Owner through the credit union named in this Agreement. DEFINITIONS: In this Agreement, the words, "you," "you," "and "yours" mean the Account Owner that signs this Agreement. The words "we," "us," and "our" mean the Credit Union that signs this Agreement. The word "account" means any account or accounts designated on this Agreement. The terms used in the Agreement have the meaning given to them in Article 4A of the Uniform Commercial Code. ACCOUNT OWNER LIABILITY: You agree to be bound by any payment order, whether or not authorized, issued in your name accepted by us in compliance with the security procedures chosen by you in this Agreement. CHANGES TO AGREEMENT: The security procedures and other terms of this Agreement may be changed only by amendment to this Agreement or by executing a new Agreement. The Agreement may not be changed	by an oral agreeme SECURITY PROCE procedures identification of the first procedures are considered and other further where the main off PAYMENT ORDERS order or other further the motice to Account Owners.	nt or by a course of dealing or custom. DURES: We will follow the security agreement fied in this Agreement. You agree that these mmercially reasonable methods of verifying payment nd transfers. RCIAL CODE ARTICLE 4A: Any fund transfers that e subject to Article 4A of the Uniform Commercial ect to the provisions of this Agreement and the Uniform Commercial Code as enacted by the state ice of the Credit Union is located. S: This is not the document that authorizes a payment at the time of each payment order. To any Account Owner is considered notice to all
SIGNATURES		
By signing below the parties agree to all the terms and conditions of this Agreement and acknowledge receipt of a copy.		
X		
Account Owner (print) Title (if applicable		Date
Credit Union Representative (print) Title (if applicable	X Signature	Date