

## AUTOMATIC DEPOSIT AUTHORIZATION FOR PERSONAL ACCOUNTS ONLY

Instructions: Complete the Authorization form below and make a copy of the completed Authorization form for your records. If you are using a checking account for Automatic Debit, you must send a voided check from the account you wish to be debited. If you are using a savings account, you must send a pre-printed savings deposit ticket that includes the ABA number and your account number. Failure to do so may result in the rejection of your payment entries. You must be an account owner/signer on the account that will be debited at the other Depository Financial Institution and the IU Credit Union account that will be credited.

Please note this authorization form should only be used if you wish to have funds deducted from another financial institution to deposit into your IU Credit Union savings or checking account.

If you transfer funds from your IU Credit Union account to another IU Credit Union account, please contact Member Services at (812) 855-7823 or (888) 855-MYCU or visit any branch. Check One: New Change Cancel - effective (Cancellation request must be received at least 5 days prior to the next transaction date) Name Choose One **Daytime Phone Number Account Number** Savings Sub Checking Sub I hereby authorize IU Credit Union to initiate debit entries to the Financial Institution listed below, which is located in the territorial jurisdiction of the United States, and if necessary initiate credit entries or adjustments to correct a debit entry originated in error, to make a deposit for the amount specified on this authorization. Deposit dates that fall on a non-business day or holiday will be processed one business day prior to the scheduled deposit date. Payments returned will be reversed and will not be resubmitted. I understand that the Credit Union is not responsible for any fees, penalties or late charges. Repeated returned payments will result in termination from the program. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. Law. Weekly on (choose one) \_\_\_\_ Monday \_\_\_\_ Tuesday \_\_\_\_ Wednesday \_\_\_\_ Thursday Frequency: \_\_\_\_ Friday ☐ Biweekly on (choose one) \_\_\_\_ Monday \_\_\_\_ Tuesday \_\_\_\_ Wednesday \_\_\_\_ Thursday \_\_\_\_ Friday Semi-monthly on \_\_\_\_\_ and \_\_\_\_ (ex. 1st and 15th of each month) Monthly on \_\_\_\_\_ (ex. 15th of each month) Annually on \_\_\_\_\_ (ex. January 5 of each year) Amount (maximum \$2,500): \$\_\_\_\_\_\_ Start Date: \_\_\_\_\_ (We must receive this authorization at least 10 days prior to the start date.) Depository Financial Institution ABA Number (Routing Number) Zip Institution Phone Number City State Choose One Name on Account (must be a signer on IUCU account) **Account Number** Checking Savings This authorization is to remain in full force and effect until IU Credit Union has received a written request to terminate this authorization in such time and in such manner as to afford IU Credit Union a reasonable time to act on it. By signing below, I certify that I am an account owner/signer on the account that will be debited at the Depository Financial Institution listed above. I further state that my IU Credit Union account has been opened at least 60 days and I agree to the terms and conditions of the Membership & Account Agreement. Date IUCU Member's Signature (must be a signer on IUCU account) A VOIDED CHECK OR PRE PRINTED SAVINGS DEPOSIT TICKET MUST BE ATTACHED TO INTIATE YOUR ACH AUTOMATIC DEPOSIT Please fax to (812) 332-7888 or mail the completed form with attachments to: **IU Credit Union** PO Box 368 Bloomington, IN 47402-0368 If you have any questions, please contact a Representative at 812-855-7823 or 888-855-MYCU (6928) CREDIT UNION USE ONLY Date Received: \_\_\_\_\_\_ Initials/Teller Number: \_\_\_\_\_ Account Open Date: \_\_\_\_\_ 🖵 Verified ID/Signature \_\_\_\_\_ Date Processed: \_\_\_ Entered: ☐ EPISYS ☐ Letter Sent Processed By: \_\_\_\_\_ SCAN THIS FORM AND THE VOIDED CHECK OR ACCOUNT VERIFICATION AS ONE ITEM AND SAVE TO THE SCAN O: DRIVE ACCOUNTING> ACH PAPERWORK. SAVE USING THE ACCOUNT NUMBER.