



Automatic Transfer Authorization

Use this form to schedule a recurring monthly transfer from your USPS FCU account to your loan or share suffix at U. S. Postal Service FCU.

Your Name:	
Daytime Telephone Number:	Extension:
Cell Number:	Email:
Apply the transfer to my USPSFCU Account Number _____ Loan/Share Suffix _____ (Note: Automatic payments to a USPS FCU line-of-credit cannot be paid from another financial institution.)	

Select a date for recurring monthly withdrawal _____. Month and Year of first withdrawal ____/____.
Amount: \$ _____

WITHDRAW PAYMENT FUNDS FROM (choose one):	
USPS FCU Account _____	☐ Savings ☐ Checking

I understand that if the scheduled withdrawal date falls on a weekend or holiday the withdrawal will be made on the last business day prior to the weekend or holiday.

I understand that this process will continue until the Credit Union has received written notification from me to cancel this transaction. Changes or termination must be in writing and delivered to the Credit Union no later than three (3) business days prior to the next withdrawal date. The Credit Union has the right to make appropriate adjustments to my Credit Union account indicated above and has the right to revoke this agreement at any time.

Signature: _____ Date (mm/dd/yyyy): ____/____/____

Date Received: _____

By: _____

Please forward to Accounting/ACH.

Revised January 2021