



California Adventist Federal Credit Union

1441 E. Chevy Chase Drive, P.O. Box 9513

Glendale, CA 91206

Phone (818) 246 - 7241

Email: operations@cafcu.net

Website: www.cafcunet

AUTOMATIC INTERNAL TRANSFER REQUEST

Member Name: _____ Account #: _____

ACCOUNT FUNDS WILL BE TRANSFERED FROM:

Savings (01) Checking (75/78) Other: _____

ACCOUNT FUNDS WILL BE TRANSFERED TO:

	DONOR ACCT TYPE	RECIPIENT ACCT #	RECIPIENT NAME	AMOUNT	HOW OFTEN
1.	<input type="checkbox"/> 01 <input type="checkbox"/> 02 <input type="checkbox"/> 03 <input type="checkbox"/> 18 <input type="checkbox"/> 75 <input type="checkbox"/> 76 <input type="checkbox"/> 78 <input type="checkbox"/> Other: _____	#		\$	
2.	<input type="checkbox"/> 01 <input type="checkbox"/> 02 <input type="checkbox"/> 03 <input type="checkbox"/> 18 <input type="checkbox"/> 75 <input type="checkbox"/> 76 <input type="checkbox"/> 78 <input type="checkbox"/> Other: _____	#		\$	
3.	<input type="checkbox"/> 01 <input type="checkbox"/> 02 <input type="checkbox"/> 03 <input type="checkbox"/> 18 <input type="checkbox"/> 75 <input type="checkbox"/> 76 <input type="checkbox"/> 78 <input type="checkbox"/> Other: _____	#		\$	
4.	<input type="checkbox"/> 01 <input type="checkbox"/> 02 <input type="checkbox"/> 03 <input type="checkbox"/> 18 <input type="checkbox"/> 75 <input type="checkbox"/> 76 <input type="checkbox"/> 78 <input type="checkbox"/> Other: _____	#		\$	

This is to authorize automatic transfer of funds between shares, loans, and other accounts stated below. I understand funds should be in the account on due date in order for the transaction(s) to be done.

Effective Date: _____ Account Holder Initial: _____

Member Signature: _____ Today's Date: _____

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(for Office Use Only)

Completed by: _____ Date: _____