



CBI Federal Credit Union

**13717 S. Route 30, Unit 157
Plainfield, IL 60544
Phone: 815-439-6676
Fax: 815-439-5010**

CBI FCU AUTOMATED TRANSFER FORM
(for Internal Recurring transfers)

Member Number _____ (The account the money is coming from)

I authorize CBI FCU to transfer the amount of \$_____ **from my**

- Savings 01 Savings 11 Holiday Club 30 Money Market 40
 75 Checking 76 Checking

To Member Number _____ Member Name _____

- Savings 01 Savings 11 Holiday Club 30 Money Market 40
 75 Checking 76 Checking Loan # _____

Every:

- Weekly Bi-weekly Semi-Monthly Monthly Annual

Transfer to begin on: _____ 20____
Date

I agree to the above transfer between accounts, also I understand that to cancel or change the amount I must submit the change in writing at least 3 business days prior to the next scheduled transfer. I understand that loan payments can be adjusted to meet loan requirements.

Signed _____ Dated _____

Printed _____