

# WRIGLEY ASSOCIATES CREDIT UNION

## Automatic Payment Service – ACH Credit Authorization (Transfers from WACU to other institutions)

WACU Account #: \_\_\_\_\_ Name: \_\_\_\_\_

I authorize **Wrigley Associates Credit Union (WACU)** to initiate the following credit entries to my account at the depository financial institution named below, hereafter called FINANCIAL INSTITUTION, and debit my account at WACU. I acknowledge that the origination of ACH transactions to my account must comply under the rules of the National Automated Clearing House Association (NACHA) and with the provisions of U.S. law. Further, I understand this agreement supplements the other terms, conditions and related disclosures associated with my account at WACU, which I have previously received and agreed to.

I also agree to have available funds in my account on the designated date, to effect this transfer. I agree to pay any applicable fees for this service as disclosed in the fee schedule.

### ACH CREDIT AUTHORIZATION (transfers to other institutions from WACU)

#### FINANCIAL INSTITUTION:

Financial Institution Name \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Routing Number \_\_\_\_\_

Account Number \_\_\_\_\_ Type of Account:  Checking  Savings

Effective Date of Credit \_\_\_\_\_ Total Credit Amount \$ \_\_\_\_\_

#### WACU:

Account Number \_\_\_\_\_ Type of Account:  Checking  Savings

## The fee for this service is \$ 5.00

#### Disclaimer

WACU will make every effort to complete this transaction unless circumstances beyond our control prevent the transfer, despite reasonable precautions that we have taken. All terms and conditions of your account agreement apply to this agreement.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

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Credit Union Use Only:

Code as ðCreditö Savings Checking

Entered by: \_\_\_\_\_ Date: \_\_\_\_\_ Verified by: \_\_\_\_\_