



ACH ORIGINATION AUTHORIZATION FORM

TRANSFER INFORMATION

Please DEPOSIT to my personal Redwood Credit Union (RCU) account, or the business account for which I may sign, by withdrawing funds from the financial institution named below. I / COMPANY authorize that institution to initiate debit entries to my personal / COMPANY's savings/checking account indicated below.

Please WITHDRAW from my personal RCU account, or the business account for which I may sign, and send the funds to the other financial institution named below.

Month To Begin: (Allow 35 days for first transfer): _____

REDWOOD CREDIT UNION INFORMATION:

Personal Account or Business Account

(Note: If the RCU account number is a business account, the account at the other financial institution must be a personal account)

Member/Business Name: _____

RCU Member Number: _____ Share ID#: _____ or Loan ID#: _____

Transfer amount \$ _____ Transfer date (day of month): _____

INFORMATION OF OTHER INSTITUTION:

Business Name or Personal Name on Account: _____ Account Type: Savings Checking

Note: For Business Accounts, please provide documentation that you are an authorized signer on the business account

Account Number: _____ Financial Institution Name: _____

Financial Institution Phone Number: _____ Institution Routing Number: _____

Financial Institution Address: _____

I hereby authorize Redwood Credit union (RCU) to transfer funds, as listed above, between my/COMPANY's accounts at RCU and another financial institution and, if necessary, to make adjustments for any errors. RCU will be responsible for the transfer in accordance with this authorization. If my selected date falls on a weekend or holiday, I understand that the transaction will be processed on the next business day. Once a transfer has been made to another financial institution, RCU will have no further responsibility for the credit or debit of such funds. The individual signing below has authority to bind COMPANY. This authorization will remain in effect until RCU (and COMPANY if a COMPANY account is involved) has received written notification to cancel this authorization in such time and in such manner as to afford COMPANY and all financial institutions a reasonable opportunity to act on the notification, or until RCU has given me/COMPANY written notice of cancellation. I further understand and agree that in order for RCU to make any automatic transfers per this Authorization Form, the full amount must be available in my/Company's account. I may be assessed a fee and cancellation of my automatic transfer agreement in the event that funds are not available for transfer. My signature below acknowledges that I have received a disclosure and agreement regarding the terms and conditions governing RCU electronic services. I acknowledge that the origination of ACH transactions to my and/or COMPANY's account must comply with the provisions of U.S. law. Payments to loans: ACH Origination transfers must be a fixed monthly amount and may not be used to pay loans with fluctuating payments such as credit cards or lines of credit. If I make a payment to my loan using other means than Autopay, such as by check, my Autopay transfer will still occur based on this authorization agreement. Monthly payments to RCU loans will cease once my loan is paid in full. The last payment amount may be less than the amount I authorize on this form due to interest and payments paid throughout the history of my loan. I understand that for the transfer to occur both the receiving and the debited account must be either my personal account or the account of COMPANY for which I have authority to both receive and withdraw funds.

Authorized Signer Name (Business Account Only)

Member Signature

Date

CU Use Only: User Number:
