

Automatic Deposit Form

Building a better life, \$100 AT A TIME.

Did you know saving only \$100 per bi-weekly paycheck equals \$2,600 a year? In five years you'll have over \$13,000 in your special savings or checking account.

- ☐ I would like to set up a recurring ACH from my local bank.
- ☐ Set up a one-time transfer from my local bank.

Setting up a recurring automatic deposit from your local bank is quick and easy! You can start with any amount you want, as low as just \$5 per month or your entire paycheck. Imagine how quickly that can build up! To begin, simply complete the section below and return it to us and we will set up a no charge recurring transfer to your Signature FCU account.

Transfer Information

Name

Financial Institution Name

Routing Number

Account Number

Start Date for Recurring Transfers¹ (The transfer will happen on this day each month going forward.)

Recurring (Select one)

☐ Monthly

☐ Bi-Weekly (26 transfers per year)

☐ Semi-Monthly (24 transfers per year)

Date of One-Time Transfer¹

Amount to Transfer² (Maximum ACH limit of \$10,000.)

Deposit to my Signature FCU Account #

☐ Savings

☐ Checking

☐ Other

Other Share Account # (Please fill in only if the "Other" box was selected above.)

¹The start date for recurring transfers or the date of the one-time transfer cannot take place on a weekend or federal holiday, it will transfer the next business day.

²For both recurring automatic deposits and one-time transfers, SFCU requires a copy of a voided check or other documentation if the amount of the transfer request is \$5,000 or more.

Return the completed form by mail or by using our **Secure Upload** button on our website, we'll take it from there.



MAIL

PO Box 148
Alexandria, VA 22313-0148

OR



SECURE UPLOAD

SignatureFCU.org/
Submit-a-Document

I hereby authorize Signature Federal Credit Union to electronically debit my account at the Financial Institution indicated above. I understand that this authorization will remain in full force and effect until I notify Signature Federal Credit Union that I wish to revoke it. I understand that Signature Federal Credit Union requires at least two (2) business days prior notice in order to cancel this authorization. I agree that ACH transactions I authorize comply with all applicable laws.

Signature

Date