

## AUTHORIZATION AGREEMENT FOR FUNDS TRANSFER

FUNDS TRANSFERRED FROM:

Member name: \_\_\_\_\_

Member number: \_\_\_\_\_ Type: \_\_\_\_\_

Amount being transferred: \$ \_\_\_\_\_

Start Date \_\_\_\_\_ Frequency: M SM W BW D A Q

FUNDS TRANSFERRED TO:

Member name: \_\_\_\_\_

Member number: \_\_\_\_\_ Type: \_\_\_\_\_

Signature \_\_\_\_\_

SS# \_\_\_\_\_ Date \_\_\_\_\_

Employee Initials \_\_\_\_\_ Date \_\_\_\_\_