

24/7 Phone Link and CU@Home Banking Linking Account Linking Authorization Form

A signature is required to link accounts except when you are a joint owner on the linked account or for Youth Accounts.

Account number: _____ Employee Initials: _____

Member Name: _____
(Owner of the account that will be initiating transfers)

Account numbers to transfer to:
(Account that will be receiving the transfers)

Account Number _____ Name on Account: _____

Account Number _____ Name on Account: _____

Account Number _____ Name on Account: _____

Account Number _____ Name on Account: _____

Signature _____ Date _____
(Owner on the account authorizing the transfers)

Phone Number _____

OFFICE USE ONLY

Signature Verified By _____

Address Change In last 3 months? Y N Procedure followed? Y N

Account Link Processed By _____ Date _____

