



Eaton Family
CREDIT UNION, INC.

Personal Banking Service-Quality You Deserve!

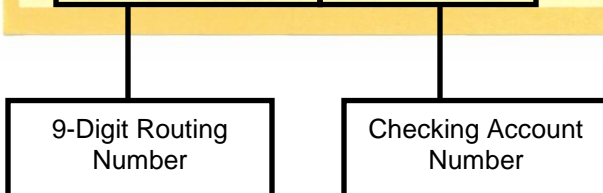
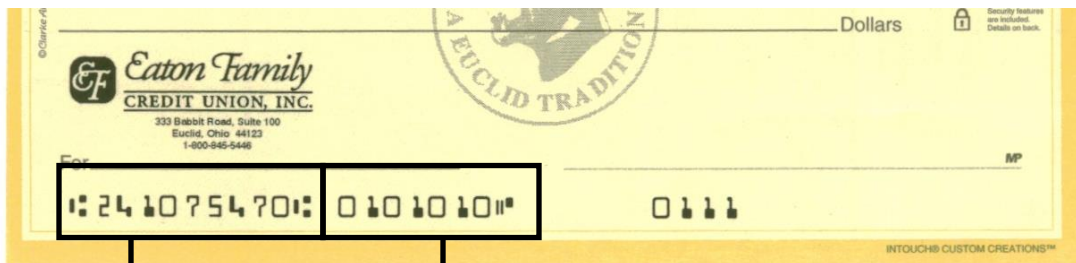
Automatic Clearinghouse (ACH) Instructions

ACH is the easiest way to transfer funds from one financial institution to another.

Members use ACH to start a saving account, add more funds to their current Eaton Family Credit Union account or make payments for example on a vehicle loan.

1. Choose whether you are sending money to Eaton Family Credit Union (**Incoming Funds**) or transferring money out of your Eaton Family Credit Union account (**Outgoing Funds**).
2. **Name of Other Financial Institution** – List the complete name of other bank or credit union name.
3. **Other Financial Institution Routing #** - This information is readily available from the other bank or credit union. If you have a checking account then use the 9-digit number on the bottom of your check (see below).
4. **Other Financial Institution Account #** - For checking account number see bottom of the check or monthly statement for saving or loan account number.
5. **Amount To Be Transferred** – List total dollar amount to be transferred on line next to account type number.
6. **Authorized Signature & Name** – All account owners must sign and date this form.
7. **Send completed** form to Eaton Family Credit Union then we will contact you to verify your information.

Fax: 216-920-2030
 Email: member@EatonFamilyCU.com
 Mail: Eaton Family Credit Union
 333 Babbitt Road
 Euclid, OH 44123
 Attention: Diane





Authorization for Automatic Clearinghouse (ACH)

Circle One: Outgoing Funds Incoming Funds Change Cancel

Frequency - Circle One

One Time Only Monthly Semi-monthly

Date: _____ Start Date: _____ Dates: _____ and _____

This request will remain in effect until a signed authorization is received to change or cancel this authorization.

Please allow up to three (3) business days for processing new ACHs and up to five (5) days to change or cancel.

Eaton Family Credit Union (EFCU) is hereby authorized to initiate an ACH entry to my/our account as indicated at the institution listed below:

Other Financial Institution Information – (Please Print)

Name: _____

Routing Number: _____

Checking Account Number: _____ \$ _____

Savings Account Number: _____ \$ _____

EFCU Information

Member Name: _____ Phone Number: _____

EFCU Account Number: _____

Checking \$ _____ Savings \$ _____ Loan (Suffix) _____ \$ _____

I am legally authorized to conduct this ACH transaction on the above listed account(s).

Authorized Signature: _____ Date: _____

All debits and credits must comply with U.S. law. They may be revoked within 60 days from settlement date. Any NSF or related fees will be electronically debited from your account.

FOR CREDIT UNION USE ONLY

Teller Number Completing form: _____ Date: _____

Date Accounting Processed: _____ Initials: _____