

MPD Community Credit Union
AUTHORIZATION FOR ONE TIME ELECTRONIC TRANSFER

ONE TIME AUTHORIZATION

I (we) hereby authorize MPD Community Credit Union to initiate **Debit** **Credit** entries to my (our) **Checking** **Savings** **Loan(s)** account indicated below and the depository named below, Hereinafter Called DEPOSITORY, to **Debit** **Credit** same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

DEPOSITORY NAME _____
(YOUR BANK NAME HERE)

CITY _____ STATE _____ ZIP _____

ROUTING/TRANSIT/ABA NO. _____

ACCOUNT NO. _____

This transaction is for _____ (date) and to occur one time only in the amount of \$ _____.

FOR SAME DAY CAN NOT BE OVER \$25,000.00

I (we) further authorize MPD Community Credit union to **Debit** **Credit** my/our (checking, savings, loan, etc.) account number _____ at MPD Community Credit Union dollar amount and date listed above.

You are responsible for monitoring all accounts to verify transfers have posted properly.

If this EFT is returned for any reason (NSF, incorrect information, etc...) a fee of \$32.00 will be charged to my account. If an item is returned to CU for a loan payment three times due to non-sufficient funds, or once for a checking/savings deposit, the credit union will consider this ACH agreement void.

TO INSURE PROPER TRANSACTIONS PLEASE ATTACH A VOIDED CHECK COPY

PRINT NAME

SIGNATURE

DATE

**RETURN FORM WITH ATTACHED
VOIDED CHECK TO:**

**SHEREE BLAND
MPD COMMUNITY CREDIT UNION
EFT DEPARTMENT
2711 OLD LEBANON RD
NASHVILLE, TN 37214**