

# Authorization to Transfer to Another Financial Institution from Wings (ACH Credit)



This form must be received by the Electronic Payments Department a minimum of **5 business days** before a transfer can be setup, canceled or changed. Please note, a one-time transfer fee of \$30 will be assessed if this authorization is cancelled after only one transfer. Wings offers other options to initiate a one-time transfer, including wire transfers, external transfers and Bill Payer. Fees may apply. See wingscu.com for additional information.

**Outgoing ACH External Transfer Limits are as followed: \$2,500 Daily and \$6,000 Monthly**

**Return completed form to:** Wings Credit Union  
14985 Glazier Avenue  
Apple Valley, MN 55124

## Member Information

Name \_\_\_\_\_ Wings ID \_\_\_\_\_

## ACH Transfer Information

### Check one:

Setup  Cancel  Change (Select all that apply to right)

Amount \_\_\_\_\_

First Transfer Date (First day the funds will be transferred out of Wings account) \_\_\_\_\_

Last Transfer Date (Last day the funds will be transferred out of Wings account) \_\_\_\_\_

### ACH Changes:

Amount  Date  Frequency  Account Information

### Frequency:

Weekly (every 7 days)  Monthly (last day of month)  
 Bi-Weekly (every 14 days)  Monthly (any day but last day): \_\_\_\_\_  
 Semi-Monthly (1st & 15th)

## Wings Account to be Withdrawn

Account Number \_\_\_\_\_  Checking  Savings

## Financial Institution to be Deposited

Name on Account \_\_\_\_\_ Name of Financial Institution \_\_\_\_\_

Routing Number \_\_\_\_\_ Account Number \_\_\_\_\_  Checking (Attach voided check)  Savings

Signature of Account Holder to be Credited (Required only when one or both accounts are a business account.) \_\_\_\_\_ Date \_\_\_\_\_

## Agreement & Signature

Wings will place a hold on the funds one business day prior to the effective transaction date to ensure the credit is received on a timely basis.

Unless an end date is indicated above, this Authorization will remain in full force and effect until Wings has received oral or written notification from me of its termination. I must notify Wings of the termination at least **5 business days** prior to the next transfer date. I agree that I shall indemnify and hold harmless Wings from and against any and all claims, demands, losses, causes of action, and liability from this Authorization.

Signature of Wings Account Holder \_\_\_\_\_ Date \_\_\_\_\_

### CU Use Only:

Transfer Record \_\_\_\_\_ Completed By \_\_\_\_\_ Date \_\_\_\_\_