

COASTAL24.com | 800-868-4262 | P.O. Box 58429, Raleigh, NC 27658-8429

Fund/Wire Transfer Agreement

From time to time you may desire to initiate a fund transfer from authorized a	ccounts held at the Credit Union. These fund Member No:
transfers requests are called payment orders in this Agreement. This Agreement governs all payment orders you give us.	
MEMBER IDENTITY INFORMATION Day Phone No:	
Mailing Address:	City/State/Zip:
	TO THIS AGREEMENT
The following authorized accounts are governed by this Agreement:	
Suffix	Suffix Suffix
Share/Savings: Share Draft/Cher Other: Other:	cking: Money Market: Other:
The account number for each of the accounts listed consists of the suffix added	
one account of the same type, more than one suffix will be listed for that account type.	
SECURITY MEASURES	
The following security measures shall be used by the Credit Union for the purport measures checked below.	se of verifying all payment order requests. The Credit Union will use the security
Call Back Procedure - When we receive your payment order request, we will confirm the payment order by calling any Account Owner authorized to verify	
transfers at the telephone number listed in our system of record. You may log into digital banking to verify the phone number on record.	
Password - When verifying and authorizing a payment order you may give us your password which is:	
AUTHORIZATIONS	
You authorize the following persons to submit payment orders in your name unless and until you notify the Credit Union in writing of a change. As permitted by applicable state law, the Credit Union may rely on any actual or facsimile signature that reasonably resembles the signature of the Authorized Person provided	
	ture that reasonably resembles the signature of the Authorized Person provided You agree to assume liability for these transactions to the extent permitted under
applicable state law. Authorized persons(s) must be an owner/signer on the account.	
Authorized Person Signature	Authorized Person Signature
X	X
Authorized Person #1 (print)	Authorized Person #2 (print)
Title (if applicable)	Title (if applicable)
Authorized Person Signature	Authorized Person Signature
X	X
Authorized Person #3 (print)	Authorized Person #4 (print)
Title (if applicable)	Title (if applicable)
AGREEMENT	
This Fund/Wire Transfer Agreement ("Agreement") governs the procedures	agreement or by a course of dealing or custom.
and responsibilities concerning payment orders initiated by the Account Owner through the credit union named in this Agreement.	SECURITY PROCEDURES: We will follow the security agreement procedures
DEFINITIONS: In this Agreement, the words, "you," "your," and "yours" mean	identified in this Agreement. You agree that these procedures are commercially reasonable methods of verifying payment orders and other fund
the Account Owner that signs this Agreement. The words "we," "us," and "our"	transfers.
mean the Credit Union that signs this Agreement. The word "account" means any account or accounts designated on this Agreement. The terms used in the	UNIFORM COMMERCIAL CODE ARTICLE 4A: Any fund transfers that we permit that are subject to Article 4A of the Uniform Commercial Code will be
Agreement have the meaning given to them in Article 4A of the Uniform	subject to the provisions of this Agreement and the provisions of the Uniform
Commercial Code. ACCOUNT OWNER LIABILITY: You agree to be bound by any payment	Commercial Code as enacted by the state where the main office of the Credit
order, whether or not authorized, issued in your name accepted by us in	Union is located. PAYMENT ORDERS: This is not the document that authorizes a payment
compliance with the security procedures chosen by you in this Agreement.	order or other fund transfers. We may require you to complete a separate
CHANGES TO AGREEMENT: The security procedures and other terms of this Agreement may be changed only by amendment to this Agreement or by	document at the time of each payment order.
executing a new Agreement. The Agreement may not be changed by an oral	NOTICE: Notice to any Account Owner is considered notice to all Account Owners.
SIGNATURES	
By signing below the parties agree to all the terms and conditions of this Agreem	ent and acknowledge receipt of a copy.
Account Owner Signature Date	Credit Union Representative Signature Date
 X	X
Account Owner (print) Title (if applicable)	Credit Union Representative (print) Title (if applicable)
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