WILLIS CREDIT UNION

AUTHORIZATION FOR RAPID CASH TRANSFER

I (We) hereby authorize Willis Credit Union to initiate debit entries to my (our) share draft or share account and transfer funds to the depository (financial institution) named below.

DEPOSITORY (FINANCIAL INSTITUTION) NAME _____

CITY, STATE, ZIP _____

ROUTING NUMBER _____ ACCOUNT NUMBER _____

This authorization is to remain in full force and effect until Willis Credit Union has received written notification from me (or either of us) of its termination in such time and such manner as to afford Willis Credit Union and Depository a reasonable opportunity to act on it.

NAME(S) _____

WILLIS CREDIT UNION ACCOUNT # OR SOCIAL SECURITY #_____

DATE _____ SIGNATURE _____

INITIAL TRANSFER AMOUNT _____ TELEPHONE # _____

PLEASE SEND VOIDED COPY OF CHECK.

FOR OFFICE USE ONLY

DATE:	AMOUNT:	DATE:	AMOUNT:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Note: Written credit authorizations must provide that the receiver may revoke the authorization only by notifying the originator in the manner specified in the authorization.