

Payments/Transfers Form My Name: _____ __ Date: _

Mail to: Element FCU, 3418 MacCorkle Ave SE, Charleston, WV 25304 Phone: 304.721.4145

	Transfers and Add One
Payments	Transfers and Add Ons
I want to make loan payments. Loan # Amount to Pay \$ Loan # Amount to Pay \$ Deduct this amount from Acct # I am paying with O cash or O check. I want to make a MasterCard payment. Card # Amount to Pay \$ Deduct this amount from Acct # I am paying with O cash or O check. I authorize Element FCU to perform these transactions on my account.	I want to Transfer funds. Transfer \$ from my Acct # to Acct # Name on Other Account Transfer \$ from my Acct # to Acct # Name on Other Account I want to Add On to my Line of Credit. Loan # Amount to Add On \$ Loan # Amount to Add On \$ Deposit this Add On to Acct # I want this amount in O cash O check Sign Here X
	e: Date: e Ave SE, Charleston, WV 25304 Phone: 304.721.4145
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I authorize Element FCU to perform these transactions on my account. Sign Here X Payments/Transfers Form My Name:	
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