

# ACH ORIGATION FORM

Member Name:	Member Account:
<b>Check One:</b> <div style="display: flex; justify-content: space-around;"> <span><b>Start Transfer:</b></span> <span><b>Change Transfer:</b></span> <span><b>Cancel Transfer:</b></span> </div>	

The undersigned hereby authorizes Silver State Schools Credit Union (SSSCU) to establish recurring electronic ACH transfers from or to your SSSCU account on the schedule you established as specified, to or from the account indicated below at the depository financial institution named below. You acknowledge that the origination of ACH transactions to your account must comply under the rules of the National Automated Clearing House Association (NACHA) and with the provisions of U.S. law.

Rules of Origination:

1. One account must be an SSSCU Account and the other must be a non-commercial account at another financial institution within the jurisdiction of the United States.
2. You must be an owner of both "From" and "To" accounts.

Amount:	
Effective Date:	Frequency:
<b>Transfer "FROM"</b> Checking    Savings	<b>Transfer "TO"</b> Checking    Savings    Loan
Legal Name on Account:	Legal Name on Account:
Account Number	Account Number
<b>Check One:</b> SSSCU Account                      Non-SSSCU Account	<b>Check One:</b> SSSCU Account                      Non-SSSCU Account
<b>COMPLETE BELOW IF NON-SSSCU ACCOUNT</b>	<b>COMPLETE BELOW IF NON-SSSCU ACCOUNT</b>
Financial Institution:	Financial Institution:
Routing Number:	Routing Number:

Transfer requests will be processed on the day requested, unless the scheduled date falls on a weekend or federal holiday. The transfer will then be made on the business day preceding the weekend or holiday. For transfers to another institution, we cannot guarantee when the receiving financial institution will make the funds available.

If the automatic transfer is returned for any reason, including non-sufficient funds, SSSCU may assess a fee, as specified in SSSCU's Schedule of Fees & Charges. SSSCU has the right to terminate the authorization agreement for any reason. This authorization is to remain in full effect until SSSCU has received notification from you of its termination in such time and in such manner as to afford SSSCU a reasonable opportunity to act on it. Notification must be made to SSSCU in writing or verbally expressed in a recorded call. You hereby acknowledge that you have received, read, and agreed with SSSCU's Electronic Fund Disclosure and Truth-In Savings Disclosure.

**I have read this form in its entirety and attest by signing below, that the information provided by me is true and correct, and that I will not hold SSSCU liable for any related loss or penalty I incur, if the requires information I provide in inaccurate or incomplete.**

Print Name:	Signature:	Date:
<b>Check One:</b> Branch Request                      Telephone Request                      Email/Fax Request		
Employee Name:	Op#:	Br#:

## \*CHECK COPY FOR NON-SSSCU ACCOUNT (NOT REQUIRED IF CANCELLING)

The Routing and Transit Numbers can be found at the bottom of a check from the receiving financial institution. It is always none digits long and is always bracketed by the computer symbol that looks like a vertical line followed by two dots. **All valid Routing and Transit Numbers start with a 0, 1, 2 or 3.**

