

## Credit Card Balance Transfer Authorization\*

**Instructions:** To transfer balances to your USEFCU Visa® Platinum Card, fill out this form.\*  
 When finished, **FAX to 405.682.6235, or mail to the above address - ATTN: Card Department.**

### Member Account Information

Primary Member	USEFCU Account Number	
Member Address	Visa Card Number	
City/State/Zip	Home Phone (       )	Work Phone (       )
Authorized Signature	Date	

### BALANCE TRANSFER INFORMATION

<b>1</b> Name of Issuing Bank/Institution
Payment Address
City/State/Zip
Account Number
Exact Amount to Transfer \$

<b>2</b> Name of Issuing Bank/Institution
Payment Address
City/State/Zip
Account Number
Exact Amount to Transfer \$

<b>3</b> Name of Issuing Bank/Institution
Payment Address
City/State/Zip
Account Number
Exact Amount to Transfer \$

<b>4</b> Name of Issuing Bank/Institution
Payment Address
City/State/Zip
Account Number
Exact Amount to Transfer \$

<b>5</b> Name of Issuing Bank/Institution
Payment Address
City/State/Zip
Account Number
Exact Amount to Transfer \$

<b>6</b> Name of Issuing Bank/Institution
Payment Address
City/State/Zip
Account Number
Exact Amount to Transfer \$

\* Balance transfer amounts are limited to the available funds of your approved credit limit amount. Transfers are considered cash advances. Therefore, finance charges will begin to accrue immediately on the transaction date. Transferred amounts cannot be from another USEFCU Visa card or loan account. Please continue making payments on your other credit card account(s) until the balance transfer is confirmed on your other institution's account statement.