



AUTOMATIC LOAN TRANSFER AGREEMENT

Names: _____

Member #: _____

Social Security #: _____ - _____ - _____

I/We wish to have loan payments allocated directly from my/our VSECU account.
The information is as follows:

Loan #: _____ Loan Type _____

Payment Frequency: _____ Payment Amount: \$ _____

Transfer Account #: _____ Excess Amount \$ _____

Effective date: _____

I/we understand that the above mentioned payment transfers will continue until the VSECU receives written notification to stop them or the loan is paid in full, whichever occurs first. Additionally, I/we understand that it is my/our responsibility to ensure that sufficient funds are in the account when the transfer is scheduled to take place. In the event that sufficient funds are not in the account on the scheduled transfer date, the payment will not be made until funds are available in the amount of the full payment due at that time.

Signature: _____ Date

Signature: _____ Date

For VSECU use only: MSR _____ Prod Ops _____ Set Up Date _____