

Member Name _____ Member Number _____

Contact Phone Number _____

- New Request
- Change to Existing Request
- Delete Existing Request**

Contact Email _____

**Deleting this Preauthorized Transfer (PAT) may affect the Annual Percentage Rate (APR) on your loan if your APR is tied to a PAT payment.

PREAUTHORIZED TRANSFER (PAT) - DEPOSIT TO LOAN

Please write legibly. Incomplete applications may delay processing. Return completed form to loanservicing@elements.org.

EXTERNAL ELECTRONIC WITHDRAWAL — Use to transfer funds from another financial institution to Elements.

FROM	Name of Financial Institution	Financial Institution's ABA Routing # (9 Digits)
	Account Number	Account Type: <input type="checkbox"/> Checking <i>Check One</i> <input type="checkbox"/> Savings

TO	CONSUMER LOANS	
	Elements Account Number	Start Date
	\$ _____ SET AMOUNT OR <input type="checkbox"/> AMOUNT OF LOAN PAYMENT	Frequency: <input type="checkbox"/> Monthly <i>Check One</i> <input type="checkbox"/> Semi-Monthly

TO	LINES OF CREDIT	
	Elements Account Number	Start Date
	<input checked="" type="checkbox"/> REGULAR PAYMENT PLUS \$ _____ ADDITIONAL AMOUNT	

ELEMENTS TRANSFER REQUEST— Use to transfer funds between Elements accounts.

FROM	Elements Account Number
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TO	CONSUMER LOANS	
	Elements Account Number	Start Date
	\$ _____ SET AMOUNT OR <input type="checkbox"/> AMOUNT OF LOAN PAYMENT	Frequency: <input type="checkbox"/> Monthly <i>Check One</i> <input type="checkbox"/> Semi-Monthly

TO	LINES OF CREDIT	
	Elements Account Number	Start Date
	<input checked="" type="checkbox"/> REGULAR PAYMENT PLUS \$ _____ ADDITIONAL AMOUNT	

TERMS

I confirm that the information provided is correct and I have the authority to make electronic withdrawals from, and payments to, these accounts. I hereby authorize Elements Financial Federal Credit Union (Elements Financial), its successors, assigns, authorized agents or any entity servicing my loan on their behalf (collectively "Lender") to initiate loan payment debit entries (the amount of which may vary with future changes in escrow, principal and interest components, as applicable) by electronic fund transfer directly from my checking or savings account indicated on this Preauthorization Transfer – Deposit to Loan form and the financial institution named on such Preauthorized Transfer – Deposit to Loan form to debit the same to such account. Transfers from Individual Retirement Accounts (IRAs), Health Savings Accounts (HSAs), or foreign accounts are not allowed. This authorization form must be received at least three (3) business days before the first scheduled transfer. I understand if any debit entries under this authorization are returned for insufficient funds or otherwise dishonored, I will promptly send Lender the total monthly payment due, plus any late charge(s) or other fees due under my loan. Lender is also authorized to initiate corrections, if necessary, to any amounts debited or credited in error. Preauthorized Transfers (PATs) are governed by the Operating Rules of the National Automated Clearing House Association (NACHA). PATs will be processed on the day requested, unless the scheduled date falls on a weekend or federal holiday, in which case, the transfer will be made on the day following the weekend or federal holiday. Lender may terminate its PAT service at any time for any reason. This authorization will remain in effect till Lender receives written notice of revocation or modification at least three (3) business days prior to the next scheduled transfer, or until Lender discontinues this service.

X _____
Signature

Date