



# Inter-Member Transfer Authorization Phone, Audio Response & Online Banking

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Complete this form to transfer funds FROM your account TO another Media City Credit Union member account on which you are not a legal owner. For example, transfers FROM your account TO your parent’s account (on which you are not a legal owner). This is referred to as a “Third Party” transfer.

### Account to Transfer From:

List account(s) from which you are a legal owner and would like to use to transfer funds **FROM**.

\_\_\_\_\_  
Account Number(s)

### Account to Transfer To:

List accounts on which you are not a legal owner, but would like to make non-revocable transfers **TO**.  
List the specific account number(s) and check appropriate box(es) below:

<input type="checkbox"/> _____ Member Name / Account Number	<input type="checkbox"/> All sub-accounts	<input type="checkbox"/> Specific sub-account(s) _____
<input type="checkbox"/> _____ Member Name / Account Number	<input type="checkbox"/> All sub-accounts	<input type="checkbox"/> Specific sub-account(s) _____

### Member Authorization

I hereby request an Inter-Member Transfer Authorization on the accounts identified above. By signing below, I agree to the terms and conditions of the “Media City Credit Union Online Banking Internet Agreement and Electronic Funds Transfer Disclosure”, and specifically the Inter-Member Transfers section contained therein.

**Important Note:** Funds transfers to third party accounts, where you are not the account legal owner, are non-revocable and cannot be reversed once the transfer has been made unless specifically authorized in writing by the recipient. Transfers from your savings or money market account to third parties are limited to six transfers per calendar month (Regulation D). Revocation of this agreement must be in writing.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### Third Party Authorization

(This section to be signed by the owner of Media City Credit Union member account on which you are not the legal owner.)

As a recipient of an authorized Third-Party Inter-Member Transfer, I understand and agree that the sender of these funds may view the number and types of accounts I maintain at the Credit Union (through the Online/Mobile Banking transfer function).

However, the sender **will never** be able to access my account transaction history **or** view my balances. The sender **cannot** perform withdrawals or transfers from my accounts.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Please submit your completed form to the Credit Union in one of the following ways:**

In Person                      Mail: 1020 W. Olive Avenue, Burbank, CA 91506

**FOR CREDIT UNION USE ONLY**

#14 account transfer FROM                      MSR \_\_\_\_\_                      Date \_\_\_\_\_  
(OB/ARU Transfer Control)