"Toni" Between-Member Transfer Authorization **Application**



"Toni" allows funds to be transferred **From** your account(s) **To** another member's account(s). To take advantage of this feature, please fill out the appropriate section to the right.

Directions:

- If you wish to be able to transfer funds *From* your account(s) *To* other members' account(s), list the member numbers you want to transfer *To* and sign the authorization from.
- If you and another member want the ability to transfer funds *To and From* each other's accounts, you must both be joint owners on each other's accounts, and the primary owner from each account must provide authorization by signing to the right.

Notes:

- To discontinue the **To** and **From** capabilities on jointly owned accounts,
 the primary owner from either account
 involved can terminate the
 authorization in writing.
- Transfers involving an advance on an existing line of credit loan can only be transferred *From* your account *To* another member's account.
- Account identification of Between-Member Transfers will be identified on the periodic statements of both the member sending (FROM) and the member receiving (70) the funds.

If you have any additional questions, contact us at the provided address or call our Member Service Center at 1-877-322-6328.

Mail this completed form to:

Toni Transfer Form The Ohio Educational Credit Union 2554 East 22nd Street Cleveland, OH 44115

Transfer "To" Access Only:

Please provide me with the ability to transfer funds **From** my Credit Union account(s) **To** the accounts of the members listed below by accessing "Toni":

	Member Name:		
Member #:	Member Name:		
Member #:	Member Name:		
My Name:	Member	Member #:	
Address:			
	Dat		
Transfer <i>"To an</i>	nd From" Access:		
listed below by acc	e with the ability to transfer funds both To and Fro ccessing "Toni." This service is restricted to member ther's accounts. The primary owner from each acco	s who are joint	
5			
	Member :	#:	
Member Name:	Member :		
Member Name:			
Member Name:			
Member Name: Address: Signature:		re:	
Member Name: Address: Signature: Member Name:	Dat	e:#:_	

OHecu Use Only:		
Signatures Verified	Operator ID:	Date: