Overdraft Protection Request

You,(PRINT NAME) authorize to: Establish Transfers Change Transfers Cancel Transfers from your below accounts, credit lines, or joint accounts, in the following order to cover overdrafts from your LAFCU checking account number			
		1st	
		LAFCU Account #	ID#
2nd			
LAFCU Account #	ID#		
2.1			
AFCU Account #	 ID #		
LAFCO ACCOUNT #	וו טו #		
	rill read and abide by the terms and conditions of the LAFCU "Master dule, Rates document, and the Disclosures Summary for Share Savings ou revoke it in writing.		
Signature	 Date		
o.g.tata.o			
CREDIT UNION USE ONLY:			
Employee Initials: Date:			



