OVERDRAFT SERVICES CONSENT

ATM and One-Time Debit Card Transactions

WHAT YOU NEED TO KNOW ABOUT OVERDRAFTS AND OVERDRAFT FEES

An overdraft occurs when you do not have enough money in your account to cover a transaction, but we pay it anyway. We can cover your overdrafts in two different ways:

1. We have standard overdraft practices that come with your account.

2. We also offer overdraft protection plans, such as a link to a share/savings account or overdraft line-of-credit, which may be less expensive than our standard overdraft practices. To learn more, ask us about these plans.

This notice explains our standard overdraft practices.

What are the standard overdraft practices that come with my account?

We <u>do</u> authorize and pay overdrafts for the following types of transactions:

- Share drafts/checks, and other transactions made using your checking account
- Automatic bill payments
- ACH transactions

We do not authorize and pay overdrafts for the following types of transactions unless you ask us to (see below):

- ATM transactions
- · One-time debit card transactions

We pay overdrafts at our discretion, which means we $\underline{\text{do not guarantee}}$ that we will always authorize and pay any type of transaction.

If we do not authorize and pay an overdraft, your transaction will be declined.

	narged if the Credit Union pays my ove rd overdraft practices:	rdraft?	
 We will charge you a fee of \$ each time we pay an ATM or debit card transaction overdraft. There is no limit on the total fees we can charge you for overdrawing your account. 			
What if I want the C transactions?	redit Union to authorize and pay over	drafts on my ATM and on	e-time debit card
If you want us to section below and	authorize and pay overdrafts on ATM and mail it to:	d one-time debit card transact	ions, complete the
	section below and mail it to:		
	CREDIT UNION ADDRESS	or call	TELEPHONE NUMBER
If there are multiple own owners on this accourd coverage.	ners on the ATM and/or debit card accour nt. Only one (1) account owner signatu	nt, either account owner can a re is needed to add or rem	act on behalf of all nove the overdraft
ADD COVERAGE	I want the Credit Union to authoriz debit card transactions. I understand	e and pay overdrafts on my a d I will be charged fees as list	ATM and one-time ed above.
	I have the right to revoke this co Credit Union in writing or by pho		tacting the
REMOVE COVERAGE	I do not want the Credit Union to one-time debit card transactions.	authorize and pay overdraft	s on my ATM and
X			
MEMBER/OWNER SIGNATURE	DATE		
Printed Name:	Account Number:		

CREDIT UNION CONSENT CONFIRMATION

Effective Date:

LOANLINER.

Signature of Credit Union Employee:

Coverage addedCoverage removed