

## Overdraft Protection Authorization

Checking Account Number: \_\_\_\_\_

I authorize the California Credit Union, to transfer funds to cover overdrafts regardless of which signer of the checking account listed above authorizes a debit to the account.

Transactions that may cause an overdraft include checks, electronic ACH payments, or ATM/Point of Sale transactions using my California Credit Union Debit Card.

Transfers will be made from accounts in the order listed below.

PRIORITY	OVERDRAFT ACCOUNT TYPE			OVERDRAFT ACCOUNT NUMBER
1	<input type="checkbox"/> Savings	<input type="checkbox"/> Money Market	<input type="checkbox"/> Line of Credit	
2	<input type="checkbox"/> Savings	<input type="checkbox"/> Money Market	<input type="checkbox"/> Line of Credit	
3	<input type="checkbox"/> Savings	<input type="checkbox"/> Money Market	<input type="checkbox"/> Line of Credit	
4	<input type="checkbox"/> Savings	<input type="checkbox"/> Money Market	<input type="checkbox"/> Line of Credit	

Authorization by a signer of the checking account listed above and the overdraft account is required below

\_\_\_\_\_  
Authorized Signer's Signature \_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name \_\_\_\_\_  
Identification/Number

\_\_\_\_\_  
Authorized Signer's Signature \_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name \_\_\_\_\_  
Identification/Number

CALIFORNIA CREDIT UNION, USE ONLY		
Processed by (Employee Name)	Branch/Dept.	QC'd By: