



*Better BANKING for Less*

**TRANSFER REQUEST FORM**

Date: \_\_\_\_\_

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

Type: \_\_\_\_\_

Member Name: \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_

**DEPOSIT INSTRUCTIONS**

Transfer Amount: \_\_\_\_\_

For Credit to: \_\_\_\_\_

Account Number: \_\_\_\_\_ Type: \_\_\_\_\_

I hereby authorize Library of Congress Federal Credit Union (LCFCU) to make a onetime transfer to the account I have noted above. I understand that once I have given this authorization I may not have access to those funds being transferred.

\_\_\_\_\_  
MEMBER(S) SIGNATURE

**Office Use Only:**

Date & Time Rec'd: \_\_\_\_\_ Rec'd by: \_\_\_\_\_

Processed by: \_\_\_\_\_