

## Transfer Control Authorization Form

Member Name _____	Initiating Account Number _____

Account (Transfer to)	Accountholder Name

- I understand that by signing this form, I am allowing the individuals listed to transfer to my account on home banking. I also understand that they will be able to see any suffixes I have on my account, including all loans and/or shares.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Employee Initials: \_\_\_\_\_ Branch: \_\_\_\_\_

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