

**Coastline Federal Credit Union
Distribution and Transfer Request Form**

Routing #: 263079409

_____ Last Name _____ First Name _____ MI _____ Social Security # _____ Account #

CSX Employees: _____

DISTRIBUTION REQUEST:

Railroad ID # _____

DIRECT DEPOSIT (ACH) _____ PAYROLL DEDUCTION _____ PR. NO _____

Check One: _____ **Weekly** _____ **Bi-Weekly** _____ **Semi-Monthly** _____ **Monthly**

I hereby authorize my employer _____

to deduct \$ _____ per pay day, starting _____ and remit this amount to COASTLINE Federal Credit Union. In accordance with the following conditions and stipulations, my employer is relieved of and from any and all liability of whatever kind of nature in honoring this authorization, including but not limited to any liability for acting pursuant to the Credit Union. In consideration of the company honoring this authorization and acting upon the same, deductions stated terminate only by written notice from the Credit Union. I understand that payroll deduction is voluntary.

Please post it to my account as follows:

| Priority | ID | Priority | Acct./ID |
|----------------------|----|-------------|----------------|
| _____ Share Savings | 00 | _____ Loan | _____ \$ _____ |
| _____ Custom Shares | | _____ Loan | _____ \$ _____ |
| _____ IRA Account | 05 | _____ Loan | _____ \$ _____ |
| _____ Christmas Club | 07 | _____ Other | _____ \$ _____ |
| _____ Share Draft | 09 | _____ Other | _____ \$ _____ |
| _____ _____ | | _____ Other | _____ \$ _____ |

TRANSFER REQUEST:

Check One: _____ **Weekly** _____ **Bi-Weekly** _____ **Semi-Monthly** _____ **Monthly**

I authorize COASTLINE FCU to transfer the following funds starting: _____

Share Transfer

Loan Transfer (Monthly Only)

| From ID | To ID | Amount | From Share ID | To Loan ID | Amount |
|---------|-------|----------|---------------|------------|----------|
| _____ | _____ | \$ _____ | _____ | _____ | \$ _____ |
| _____ | _____ | \$ _____ | _____ | _____ | \$ _____ |
| _____ | _____ | \$ _____ | _____ | _____ | \$ _____ |
| _____ | _____ | \$ _____ | _____ | _____ | \$ _____ |

_____ Witness _____ Member Signature _____ Date