



Beacon Credit Union 7910 National Tnpk Louisville, KY 40214 (502) 366-6022

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

Member  
SSN: \_\_\_\_\_

Member  
Account number \_\_\_\_\_

Union  
Name: SMW Local 110

I authorize Beacon Credit Union to withdraw funds from my account listed above sufficient funds to pay my monthly union dues to my union listed above. I understand and agree to the following:

1. If there are insufficient funds in the designated account on the date and time the Credit Union processes the union dues program:
  - The Credit Union will not search for another account under the same ownership and transfer funds from any such account to the designated account for the payment of the dues,
  - The Credit Union will not process the dues program a subsequent time for the same month, or
  - The Credit Union will not overdraw an account nor allow the account to drop below the minimum balance requirement
2. If there are insufficient funds in the designated account on the date and time the Credit Union processes the union dues program, I understand that I will be responsible for the payment of my union dues.
3. In the event of an increase or decrease, I authorize the Credit Union to changel the amount of the deduction to be remitted to my union.
4. I understand and agree that the Credit Union will not be held liable for an overpayment of dues sent to my union. All refunds shall come from the union.

\_\_\_\_\_  
Member Signature

\_\_\_\_\_  
Date

Credit Union use only		
_____	_____	\$ _____
Batch Entry Date	CU Employee	Amount