

BALANCE TRANSFER REQUEST

Yes! I want to transfer the credit card balance(s) listed below to my Notre Dame FCU credit card. I understand transfers are subject to my available credit. If there is not enough credit available to complete my request, I understand a partial payment may be issued. I understand I will receive a check receipt indicating the amount of funds transferred to that lender. List the most important transfer first. Attach additional requests on a separate sheet of paper. Please complete this form and email to: **NDFCU@notredamefcu.com** or drop off at your nearest branch.

Balance transfers are subject to a minimum fee of at least 3%, depending on your card type.

Date _____

Card Issuer _____

Name on Account _____

Card Payment Address _____

City _____ State _____ Zip _____

Complete Card Account # _____

Exact amount to pay \$ _____

Deposit balance transfer funds to Account # _____

Send check to address above. *I understand it could take 7-10 business days for company to receive my check.*

Card Issuer _____

Name on Account _____

Card Payment Address _____

City _____ State _____ Zip _____

Complete Card Account # _____

Exact amount to pay \$ _____

Deposit balance transfer funds to Account # _____

Send check to address above. *I understand it could take 7-10 business days for company to receive my check.*

By signing below, I certify that I have read and agreed to all the terms, authorizations, and disclosures included with this offer. I understand that if any of the above information is incorrect it could delay the posting of my funds or they could be misapplied. To avoid this, we ask that you provide a copy of your statement or, at a minimum, your remittance slip.

- I confirm that I wish to transfer the above amounts to the Notre Dame FCU credit card number listed below and agree to the balance transfer fee listed in the terms & conditions of my cardholder agreement.
- I understand if I selected the send check option that it could take 7-10 business days for my lender to receive my check and I must continue to make payments on the above card until my balance transfer is recieved.

My Notre Dame FCU credit card account number _____

Notre Dame FCU Membership Number _____

Signature _____

Please continue to make payments to the lenders listed above until you receive notification from those lenders that your balance has been transferred to your new Notre Dame FCU credit card.