



New Enrollment Update Existing Enrollment

AUTOMATIC PAYMENT AUTHORIZATION

I, the undersigned, hereby authorize Nusenda Credit Union, (the "Company") to initiate periodic, electronic, automatic withdrawals/deposits from my account(s) in the Financial Institution, and I authorize the Financial Institution to honor requests for such withdrawals/deposits submitted by the Company, and to debit/credit the same from my account(s) listed below. The withdrawals/deposits initiated by the Company are for the purpose of Loan Payments or Funds Transfers to an account owned by me. I acknowledge that the origination of ACH transactions to/from my account must comply with the NACHA Operating Rules and the provisions of U.S. Law.

Nusenda Credit Union Account Information:

Credit TO NUSENDA

Withdraw FROM NUSENDA

Mark the desired field

Member Name

Member Number

Account Type Loan Savings Checking Other

Account Number

Transaction Amount

Other Financial Institution Information:

Credit TO OTHER Institution

Withdraw FROM OTHER Institution

Mark the desired field

Name of Other Financial Institution

Financial Institution Routing & Transit Number (ABA#)

Account Number

Type of Account Savings Checking

Not valid for any other type of account

Selected Date of the Month for Transaction to occur 5 10 15 20 25

Month to start (must allow 15 days for enrollment)

Name Account Listed Under

NOTE: MEMBER MUST BE A SIGNER ON BOTH ACCOUNTS

Signature of Authorizing Party _____

Date

Daytime Phone Number

TERMS AND CONDITIONS

This authorization is subject to the Terms and Conditions listed below and shall remain in effect until the Company or the Financial Institution has received written notice from me of its termination in such time and manner as to afford the Company or the Financial Institution a reasonable time to act on such termination; or until the Company or the Financial Institution has notified me in writing ten (10) days prior to the Company's or the Financial Institution's termination of this arrangement.

(1) These transactions are to be made electronically and are to be governed by the Rules of the appropriate Automated Clearing House Association as they are amended from time to time.

(2) The party signing this authorization is a "customer," and debit/credit entries are "items" as defined under §55-4-104 of the New Mexico Uniform Commercial Code.

(3) Except as otherwise limited herein, payment of a debit/credit entry initiated or about to be initiated pursuant to this authorization may be stopped in the same manner and subject to the same fees and limitations as a stop payment order on a share draft (as set out in the Financial Institution's policies and in the New Mexico Uniform Commercial Code).

(4) In addition to the duties of a "Customer" under the Commercial Code, the Customer also has a duty to promptly examine the correctness of the monthly account statement disclosing electronic entries and to promptly notify the Financial Institution of any error therein.

(5) The Credit Union has a duty to credit/debit the Customer's account in the amount of all debit/credit entries the Customer represents as erroneous, if the Customer notified the Financial Institution in writing of the error no later than the earlier of fifteen (15) days after the date the Financial Institution sends the account statement that includes the indication of a debit entry made to the Customer's account, or forty-five (45) days of the settlement date for such entries.

(6) The Customer shall maintain balances sufficient to cover all transactions, chargebacks, or reversals of debit entries initiated by the Credit Union pursuant to this agreement. The Customer understands that the origination entry can occur up to three (3) business days in advance of the effective date, and that the available balance as of that entry date must be sufficient to cover these transactions.

NOTE: Once this transaction is properly prenoted, should this transfer be returned by the other Financial Institution (due to insufficient funds, Regulation D, etc.), the Credit Union will NOT resubmit the transaction. The member will assume responsibility for the transaction and any fees associated and will need to complete it manually. The Credit Union will resume transfer with the next regular transaction date.

Signature _____

Date

Please complete and drop off the form at any branch location, or mail it to:

Nusenda Credit Union
Attn: Deposit Services
P.O. Box 8530
Albuquerque, NM 87198

Nusenda Credit Union is the trade name for Nusenda Federal Credit Union.