

Overdraft Protection Update Form



Form Instructions:

- 1 — Complete all applicable fields
- 2 — Print completed form
- 3 — Signature and date required

* May be completed by the joint owner if the joint owner is listed on all shares affected.

4 — Print and mail the completed form to:

Delta Community Credit Union,
 ATTN: Deposit Services
 PO Box 20541 Atlanta, 30320-2541,
 or Fax 404-677-4802

Member Information

Member Name _____

Delta Community Account Number _____

Checking Account Number
 (receiving overdraft protection) _____

Add, remove or rearrange the order of overdraft protection for my Checking Account:

Check the box next to the account you would like to add or remove. Then indicate the order in which you would like your overdraft accounts to appear.

Accounts Available as Overdraft Protection	Add Account	Remove Account	Order of overdraft protection accounts Rank in desired order using 1 as first overdraft account, 2 as second, etc...
Savings			
Additional Savings			
Money Market			
*Visa			
*Overdraft Protection Loan			
*Personal Line of Credit			
**Another Member's Account			
Member Name: _____			
Account Number: _____			
Share ID providing overdraft protection _____			

*Loan must already be established to add or remove

**Requires signature of other member below

Signature of Member or Joint
 Owner (Joint Owner must be on all
 shares affected) _____

Date _____

Signature of Other Member (if another
 member's account is used as
 overdraft protection) _____

Date _____



NCUA
 This credit union is federally
 insured by the National Credit
 Union Administration.