

ELECTRONIC WITHDRAWAL / ACH DEBIT

(Give this completed form to the party processing the withdrawal or keep for your records)

Our member, _____ has requested that we honor an ACH Debit/Electronic Withdrawal from his/her account. Please use the following account information for withdrawal.

Withdraw from:

SAVINGS Account:

_____ Amount: \$_____ **Use account/member number only (no additional numbers)

AND / OR (circle one)

CHECKING Account:

_____ Amount: \$_____ And and the section of the sec

**Use the 13-digit MICR line used for check/draft processing:

Susan B. Sample 2244 Lois Lane Anytown, FL 32123-4567			5678
arytown, PL Janap-100/		.9	44
tr To The star Of			
			i des
	567890123 - 5678		
	567890123#5678		
1234567890012345	567890123#5678 Your bank		
Your 9-digit bank ABA routing number	<u> </u>		

GHFCU Routing and Transit Number #261271694

If you have any questions or need additional information, please call (912) 236-4400.

Date:	
Name:	
Signature:	(If Required)
	(II REQUITED)

Georgia Heritage Federal Credit Union • PO Box 1920 • Savannah, GA 31402 • 912-236-4400