



Recurring Payment Order Authorization

Service Credit Union Branch Office: _____ Date: _____ (mm/dd/yy)

Action (Check one): Start Change Cancel

Checking Account: _____ Suffix: 09
(Required)

Member Name (Remitter): _____

Member Email Address: _____

Start (Date of first transfer): _____ (mm/dd/yy)

Stop (Date of last transfer): _____ (mm/dd/yy)

Frequency (Check one): Weekly (Every 7 days) Bi-Weekly (Every 14 days) Monthly (Once a month on date specified) Quarterly (Every 3 months on date specified)

I. DETAILS:

Payee (Last Name, First Name/Company) / Empfänger (Name, Vorname/Firma)

IBAN (International Bank Account Number) For the Payee / IBAN des Begünstigten

Payee's Physical Address / Adresse des Empfängers

BIC (Bank Identification Code) of the Financial Institution / BIC der Empfängerbank

Currency Code / Währung Amount / Betrag

Customer Reference (Bill No.) / Kunden Verwendungszweck (Referenznummer)

Additional Details / noch Verwendungszweck

Member (Name, First Name) / Kontoinhaber (Name, Vorname)

Member's Physical Address / Adresse des Kontoinhabers

DE 5403001100
IBAN Member's BLZ No. / BLZ des Kto.-Inhab. Member's Acc. No. / Kto.-Nr. des Kto.-Inhab.

2. AUTHORIZATION: I hereby authorize Service Credit Union to transfer payment(s) on a recurring basis to the beneficiary shown above. I acknowledge and agree to the terms and conditions disclosed on the reverse of this form.

Member's Signature: _____ Date: _____

Employee Signature: _____ Date: _____

3. RPO CHANGE: I hereby request the following change(s) to my RPO, effective date: _____

Details: _____

Member's Signature: _____ Date: _____

Employee Signature: _____ Date: _____



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4. **RPO CANCELLATION:** I hereby request cancellation of my RPO, last transfer to be made on: _____ (mm/dd/yy)

Member's Name (Printed): _____

Account Number: _____ Suffix: 09

Member's Signature: _____ Date: _____

Employee Signature: _____ Date: _____

RECURRING PAYMENT ORDER TERMS & CONDITION

The Recurring Payment Order detailed in the input screens of this electronic request and authorization will be initiated on the payment start date indicated, and will continue with the frequency requested, until SCU receives written instructions to the contrary from me, or until the specified stop date is reached, whichever comes first.

I understand that the US dollar equivalent of the currency amount selected for the Recurring Payment Order will be deducted from my account to initiate the transfer of payment, and that the actual credit date to the beneficiary's bank account will normally be within 3 to 5 business days later.

Exceptions:

A. If the requested payment date falls on a date which does not occur in a given month (such as the 31st), the payment date will be adjusted to the last calendar day of the month.

B. If the requested, or adjusted, payment date falls on a weekend or U.S. Holiday, the payment process will be initiated on the next business day.

All payments are transferred in the currency notated on the form. If the beneficiary account to which the funds are ultimately credited is not denominated in the currency notated on the form, the amount could be converted to the appropriate currency (i.e. British Sterling, Swiss Franc, Swedish Kroner, etc.) by the receiving financial institution or returned back to SCU. SCU is not liable for, and has no influence over the conversion rate applied to the conversion of the funds.

I agree to give SCU 2 business days written notice in advance if I wish to change or cancel this Recurring Payment Order. If I fail to give SCU the required 2 business days advance written notice to change or cancel this Recurring Payment Order, and a transfer is affected in accordance with this authorization, I agree not to hold SCU liable.

If a transfer is affected in accordance with the details provided in this electronic request and authorization, I agree not to hold SCU liable for any subsequent delays in posting by any intermediary bank or beneficiary.

For each transfer made, SCU will charge my account a fee in accordance with the rate and fee schedule.

I agree to maintain in my account an available credit balance equal to the US dollar equivalent of the Recurring Payment Order transfer, including the transfer fee. Should SCU, at its sole discretion, attempt a Payment Order transfer or fee posting against insufficient funds, normal overdraft charges will be debited from my account as currently applicable. I agree not to hold SCU liable if other items are returned due to insufficient funds. **If a Recurring Payment Order transfer is not executed due to insufficient funds, SCU may, at its sole discretion, attempt to affect the transfer a second time, subject to the same conditions as the first attempt.**

If a Beneficiary is identified by name and an identifying account number, payments made to a Beneficiary might be made on the basis of an identifying account number, even if the number identified is a person different than the named Beneficiary. For all payments, regardless of their currency, the receiving bank might rely on the identifying account number and/or the routing/transfer number, as the proper identification, even if it identifies a bank different from the named bank, on the transfer.

I understand that it is my sole responsibility to ensure and verify that the information I have provided to SCU is correct, complete and legible. Should I provide SCU with incorrect information, I agree not to hold SCU liable for transfers sent to the incorrect bank, account, or receiver. I understand that SCU will not be able to recall or request return of the funds due to incorrect information.

In the event that any beneficiary or intermediary bank returns any portion of the funds from this Recurring Payment Order transfer, as in the case of an overpayment, SCU will, upon receipt of funds, credit my account with the net amount resulting from the reconversion of the local currency at the reconversion exchange rate in effect on the business date when the funds are returned.

In all instances above, "business day" or "business date" refers to United States business days/dates.

Should SCU make changes to the conditions of this Recurring Payment Order, I will be notified of such changes in writing. Unless I cancel this Recurring Payment Order authorization in writing at SCU within 21 days of such notification, I agree to abide by those changes.

SCU may terminate this Recurring Payment Order 30 days after mailing written notice to my last known home address.

FOR EUROPE ONLY:

By accepting this disclosure, the depositor agrees to the processing by Service Credit Union, its agents and associates of any personal data held in connection with the service being provided under this agreement. Depositor further agrees that Service Credit Union, its agent and associates, WILL transfer such personal data outside the European Economic Area, in order to provide service, as allowed and described under the European Union Data Protection Act.