

VISA® Balance Transfer Request Form

Complete this form to start saving on balances transferred to your American Eagle VISA® credit card. The maximum total transfer amount will be based on your approved credit line. List the most important transfer first. For Check Payable To, list the financial institution (not yourself, an individual, or AEFCU). Continue to make your payments on these accounts until the payment for the transferred amount appears on your other issuer's statement.

To transfer balances from other higher-rate credit cards and loans, fill out this form, print, and:

- **Call Cardholder Services at 844.431.0818 (Signature card) or 800.842.0145 (All other cards).** Please have your credit card number available along with creditor's name, account number, payment address, and transfer amount. **Or**
- **Fax to the Credit Union at 860.291.6376. Or**
- **Mail to the Credit Union: AEFCU, Attn: Card Services Department, P.O. Box 280128, East Hartford, CT 06128-9913**

Name _____

Street _____ City _____ State _____ Zip _____

Phone # _____ VISA # _____

1. Check Payable To _____ Account Number _____

Payment Address _____

City _____ State _____ Zip _____ Transfer Amount \$ _____

2. Check Payable To _____ Account Number _____

Payment Address _____

City _____ State _____ Zip _____ Transfer Amount \$ _____

3. Check Payable To _____ Account Number _____

Payment Address _____

City _____ State _____ Zip _____ Transfer Amount \$ _____

By signing below you are aware of a balance transfer fee disclosed in your card agreement.

Member's Signature _____ Date _____

Balance transfer request will not take place without a cardholder's signature.