

VISA CREDIT CARD BALANCE TRANSFER FORM

Please complete the information below and mail or drop off at Branch 6000 NALC, 630 Broadway Amityville, NY 11701

Please check one

Yes, I am a current Branch 6000 Cardholder and would like to transfer other credit card balance(s) to Branch 6000 NALC CU

If new card member, please fill out the VISA application online or stop by our office and submit this form with your application.

Yes, I would like to apply for a Branch 6000 VISA card and transfer my credit card balance(s) to Branch 6000.

Name _____ Phone Number (____) _____

Transfer Amounts and Account Numbers:

Amount	Acct. Number (refer to credit card)	Financial Institution/Department Store card issuer
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Full Address of Financial Institution as shown on your most recent billing statement.

Amount	Acct. Number (refer to credit card)	Financial Institution/Department Store card issuer
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Full Address of Financial Institution as shown on your most recent billing statement.

Your Signature _____ Date

Important! If balance transfer request(s) is more than your available credit limit, we will automatically lower the balance transfer amount to your available credit limit and complete the transfer. Please allow 3 to 4 weeks for processing.