



General Electric Credit Union

## Credit Card Balance Transfer

Complete this form in its entirety and send it to EFT/Card Services via: fax - 513.733.0210; mail - GECU, Attn: EFT/Card Services, 10485 Reading Road, Cincinnati, OH 45241; or any branch location.

Member Name: \_\_\_\_\_ Member Number: \_\_\_\_\_

GECU Credit Card Number to transfer balances to: \_\_\_\_\_

**BALANCE TRANSFER SECTION** (please print) Attach a separate sheet for additional balance transfers.

Financial Institution Name		Name on Account		Amount	
Address			City	State	Zip
Credit Card Number			Card Type (i.e., Visa, MasterCard, etc.)		

Financial Institution Name		Name on Account		Amount	
Address			City	State	Zip
Credit Card Number			Card Type (i.e., Visa, MasterCard, etc.)		

Financial Institution Name		Name on Account		Amount	
Address			City	State	Zip
Credit Card Number			Card Type (i.e., Visa, MasterCard, etc.)		

Financial Institution Name		Name on Account		Amount	
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Credit Card Number			Card Type (i.e., Visa, MasterCard, etc.)		

Financial Institution Name		Name on Account		Amount	
Address			City	State	Zip
Credit Card Number			Card Type (i.e., Visa, MasterCard, etc.)		

I/We authorize General Electric Credit Union to act on my/our behalf to transfer the balance(s) listed above to my/our GECU Credit Card account up to my/our available balance. I/We understand this transfer(s) will be done via cash advance to my/our GECU Credit Card account and will begin accruing interest immediately. It may take 4-6 weeks for the balance transfer to occur. I/We understand that I/we may need to make a payment on my/our present account(s) to keep them current.

Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_