

Electronic Funds Transfer (EFT) Form

Directions: Print your name exactly as it appears on your checking account and sign where indicated. EFT requests may take up to three months to process. A monthly statement requiring payment will be sent until your EFT request is processed.

Please attach a voided check (NO DEPOSIT SLIPS) to this form for verification of bank information.

Applicant's Name (Please Print) _____

Bank Name _____

Routing Number _____ Account Number _____

Member ID Number _____

Applicant's Signature _____

Date _____

****CANNOT BE A SAVINGS ACCOUNT****



Routing Number

Account Number

Check Number

- PO BOX 9975 | Canton, OH 44711
- PHONE: 330-363-4031 | TOLL FREE: 1-877-863-1791 | TTY: 711
- FAX: 330-363-2062
- WEBSITE: www.primetimechoices.com