



SMW 104 Federal Credit Union
PO Box 2278 | San Leandro, CA 94577 | Phone 800-464-5987 | Fax 510-483-2809

Visa® Balance Transfer Request Form
Complete this form, make sure to sign it, then mail or fax it back to us for processing

Please print your name

SMW 104 FCU Account Number

_____ Credit Card Number	_____ Card Issuer (Name of Bank, department store, etc.)
_____ Payment Address (where you send your payments)	_____ City, State and Zip
\$ _____ Amount you wish to transfer	

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Member Signature

Date

I understand the accounts from which I transfer the entire balance will not be closed automatically after the transfers have been completed, and that it is my responsibility to close these accounts if I choose. I authorize SMW 104 Federal Credit Union to forward payment on my behalf for the accounts listed above.

*You may not transfer more than your available credit limit. You must keep your payments in good standing until SMW 104 Federal Credit Union has forwarded payment on your behalf. SMW 104 Federal Credit Union is not liable for late payment fees that may be imposed as a result of your request for us to transfer balances. Interest will accrue from the date the balance transfer was processed.