



GRACE CO-OPERATIVE CREDIT UNION LIMITED



UPDATE OF MEMBER'S BANKING INFORMATION
FOR ELECTRONIC FUNDS TRANSFER

ACCOUNT NO.:

TRN:

NAME OF BANK: _____

BRANCH WHERE ACCOUNT WAS OPENED: _____

BANK ACCOUNT NO.: _____

(No dashes, spaces, or leading zeros)

TYPE OF ACCOUNT: Savings

Checking/Deposit

NAME OF ACCOUNT HOLDER: _____

Signature _____

Witnessed by: _____

Date: _____

FOR OFFICIAL USE ONLY

Amended By: _____

Date:

Checked By: _____

Date:

N.B. We are only able to transfer funds to accounts held at Commercial Banks (i.e. no Building Societies, Credit Unions, Merchant Banks etc).

Grace Co-operative Credit Union Limited shall not be liable for any errors arising from any incorrect account details submitted by you.