



DIRECT DEPOSIT

Have your payroll or retirement funds directly deposited to your USECU checking account. You may then schedule automatic transfers to your savings and/or sub accounts.

ELECTRONIC SERVICES

- Access your accounts 24/7 via Home Banking at myusecu.org, the USECU Mobile App, or FEDS Audio Response System at 312.922.5310
- Your USECU Debit Card provides access to your Checking account funds at over 55,000 surcharge-free ATMs worldwide.
- Deposit checks using the Remote Deposit feature on our Mobile App.
- Send or receive money using Zelle®.
- Transfer funds between your accounts at USECU and your account at another financial institution with the External Transfer feature on Home Banking.
- Pay your bills on the Free Home Banking Bill Payment feature.

USA PATRIOT ACT

To help the government fight the funding of terrorism and money laundering, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account.

What this means for you: when you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We will also ask to see your driver's license, state issued identification, or other identifying documents.

Additional Account Signature Card

ACCOUNT AGREEMENT

Member Number _____ Date _____



TYPE OF ACCOUNT:

Member Name _____

Street Address _____

City/State/Zip _____

Email Address _____

Home Phone _____ Cell Phone _____ Work Phone _____

BENEFICIARY DESIGNATION:

| Printed Name | Date of Birth | S/S Number | Relationship |
|--------------|---------------|------------|--------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

SIGNATURES:

X _____
Primary Owner/Member Signature Social Security Number _____

Printed Name Birth Date _____

X _____
Legal Owner/Member Signature Social Security Number _____

Printed Name Birth Date _____

X _____
Legal Owner/Member Signature Social Security Number _____

Printed Name Birth Date _____