



## Automatic Transfer Authorization

New       Change       Termination

**Type of Transfer:**  Transfer between AIG Bank Accounts (Internal)  
 Transfer to another bank (External)  
 Transfer from another bank (External)  
 Mail Bank Check

**AIG Bank Account #** \_\_\_\_\_

Interest : Choose a frequency:  Monthly     Semi-annually  
 Quarterly     Annually

OR

Other \$\_\_\_\_\_ (Min. \$10.00) (Do not choose a frequency if one-time transfer)  
 Choose a frequency:  Monthly     Semi-annually  
 Quarterly     Annually  
 Biweekly: \_\_\_\_\_  
(Indicate day of week)

(Note: Bank Checks will not be issued more frequently than monthly)  
**Begin/Cancel transfer:**

Immediately (Allow at least one week for processing)

OR

On: \_\_\_\_/\_\_\_\_/\_\_\_\_.

(Enter the date on which the deduction should begin/stop.  
Use this for future dated authorizations only.)

**EXTERNAL ACCOUNT TO BE DEBITED/CREDITED (For Internal and External Deposits/Withdrawals Only)**

<b>NAME(S) ON ACCOUNT:</b>	<b>ACCOUNT NUMBER:</b>
<b>External Deposits/Withdrawals Only</b>	
<b>INSTITUTION NAME:</b>	<b>CITY, STATE:</b>
<b>ACCOUNT TYPE:</b> <input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS	<b>TRANSIT/ROUTING #:</b> _____

I/We authorize AIG Federal Savings Bank ("AIG Bank") to initiate credit and/or debit entries and, if necessary, to initiate any debit entries to correct an erroneous credit entry to my/our account(s) at the financial institution(s) listed above for the purpose of automatically transferring funds as indicated above. I/We acknowledge that the origination of these transactions must comply with the provisions of the U.S. law. I/We understand that this authorization will remain in full force and effect until AIG Bank has received written notification from me(or either of us) of its termination in such time and in such manner as to afford AIG Bank and financial institution(s) a reasonable opportunity to act on it.      **\*\*\*\* PLEASE FAX TO (302) 427-2371 \*\*\*\***

NAME(S) (Print or Type) _____ ID# _____	
_____ (Signature)	_____ (Signature)
_____ Date	_____ Date

**Member FDIC**

*For Bank Use Only:*

Initiated by: \_\_\_\_\_

Approved by: \_\_\_\_\_

For ACH only: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

*Revised 7-2003*