

Norristown Bell Credit Union

BALANCE TRANSFER AUTHORIZATION

I (we) am requesting to transfer the following credit card account(s) to my Norristown Bell Credit Union Visa.

1.	_____	_____	\$ _____
	Account Number	Card Issuer	Amount
2.	_____	_____	\$ _____
	Account Number	Card Issuer	Amount
3.	_____	_____	\$ _____
	Account Number	Card Issuer	Amount
4.	_____	_____	\$ _____
	Account Number	Card Issuer	Amount

By signing below I (we) authorize Norristown Bell Credit Union to cash advance the amount I (we) request for each account to be transferred.

_____	_____	_____	_____
Signature	Date	Signature	Date

Please include a copy of your most recent statement for each credit card balance you are transferring.

Note: The accounts from which you transfer the entire balance will not automatically be closed after the transfer is completed. It is your responsibility to close the account(s), if you so choose.