Balance Transfer Request

Please send a copy of your last statement on each account.

Upon approval, I/we wish to transfer the amount shown on the loan or credit card accounts(s) listed below as a Transfer of Balance to my Great Lakes Credit Union Visa credit card account.



Name (please print)			Joint Name			
GLCU Account	Daytime Phon	ne ()		☐ Home ☐ Work	Best time to call between 8AM-5PM CT:	
Creditor	Address				Phone #	
Account #	or Visa Card #				Amount to Transfer: \$	
Creditor	Address				Phone #	
Account #	or Visa Card #				Amount to Transfer: \$	
Creditor	Address				Phone #	
Account #	or Visa Card #				Amount to Transfer: \$	
X		X				
Applicant Signature		Joint Signature		_	Date	<u> </u>

Transfers are not guaranteed, are subject to approval and available credit line. If you receive a statement from your creditor, please pay your minimum monthly payment to stay current on your credit card or loan because processing may take up to 3 weeks. GLCU is not responsible for inaccurate or incomplete information provided to us on this form.