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See / Jump / Transfer Online Banking Authorization Form

See / Jump Overview

See allows a member to login to their membership and monitor balances and transaction activity for another account they are joint on. See authorization does not allow access to conduct account transactions.

Jump allows a member to login to their membership and jump to another membership without additional authentication. With few exceptions, like applying for a loan or changing passwords, they may conduct transactions.

By granting See and/or Jump permission to another membership, the other account will see ALL current and future accounts under that membership regardless of their privileges on a particular sub-account.

See / Jump Authorization

By signing below, I authorize the following membership(s) to have See and/or Jump access to my membership through online banking. See access grants full viewing privileges of all current and future sub-accounts. Jump access grants full online banking privileges of all current and future sub-accounts. I may revoke this authorization any time in writing.

Membership: _____	<input type="checkbox"/> See	<input type="checkbox"/> Jump	<input type="checkbox"/> Revoke Authorization
Membership: _____	<input type="checkbox"/> See	<input type="checkbox"/> Jump	<input type="checkbox"/> Revoke Authorization
Membership: _____	<input type="checkbox"/> See	<input type="checkbox"/> Jump	<input type="checkbox"/> Revoke Authorization

Signature

Date

Transfer Overview

Transfer authorization allows a member to login to their membership and transfer funds into another membership account that they are an authorized signer on.

Transfer Authorization

By signing below, I authorize that I have legal authority to make transactions on the following membership(s), and would like to have access to transfer funds in online banking:

From Membership: _____ To Membership: _____

Primary Name on Membership: _____

From Membership: _____ To Membership: _____

Primary Name on Membership: _____

From Membership: _____ To Membership: _____

Primary Name on Membership: _____

Signature

Date

Employee ID

Employee Initials