What You Need to Know about Overdrafts and Overdraft Fees

> You <u>must</u> Opt-In to ODP for ECU to pay overdrafts on one-time Point-of-Sale Debit/Checking card transactions and ATM card transactions.

An <u>overdraft</u> occurs when you do not have sufficient available funds in your account to cover a transaction, but we pay it anyway.

This notice explains our overdraft practices.

What is our current overdraft policy?

We **<u>do</u>** authorize and pay overdrafts for the following types of transactions:

- Checks you have written; and
- Withdrawals you have authorized.

We **<u>do not</u>** authorize and pay overdrafts for the following types of transactions unless you ask us to (see below):

- ATM transactions; and
- One-time Point-of-Sale (POS) Debit/Checking Card transactions.

We pay overdrafts at our discretion, which means we **do not guarantee** that we will always authorize and pay any type of overdraft.

If we do <u>not</u> authorize and pay an overdraft, your transaction will be declined.

What fees will I be charged if Educators Credit Union pays my overdraft?

- We will charge you a fee of up to \$28 for each item paid by overdraft;
- There is <u>no limit</u> to the total number of times we can charge you for overdrawing your account.
- What if I want Educators Credit Union to authorize and pay overdrafts on my one-time Point-of-Sale Debit/Checking and ATM card transactions?

If you want us to pay overdrafts on ATM and POS transactions call 254-776-7900 (toll free 800-596-5460), visit our website (www.edcu.com), or complete the form below. The form may be taken to any ECU location, faxed to 254-751-5876 or mailed to PO Box 20728, Waco TX 76702-0728.

Yes, I <u>want</u> Educators Credit Union to authorize and pay overdrafts on my ATM and One-time POS Debit/Checking card transactions. I understand that I can revoke this consent at any time by submitting notification in writing to Educators Credit Union.

No, I do not want Educators Credit Union Union to authorize and pay overdrafts on my ATM and One-time POS Debit/Checking card transactions.

I have read and understand the conditions of the overdraft program as described above

Signed:	Date:
Printed Name:	_
Account Number(s):	
CU use only: Employee Signature:	