

ABSC BUILDING, SUITE 100 30 ISABELLA STREET PITTSBURGH, PA 15212

Checking/ATM/VISA Check Card Application Account #							
PRIMARY OWNER							
Primary Owner Name		Social Security # (tax id #)					
Home Address			City		State	Zip	
Date of Birth	Family Member of	<u></u>		Home Phone			
Date of Birth	Taining Wiember of			110mc 1 mone	-		
Employed By (include location)				Work Phone			
JOINT							
Joint Owner Name		Sc	ocial Security # (tax id #)			
D (CD) d	II DI			117 1 DI			
Date of Birth	Home Phone			Work Phone	;		
I/WE DESIRE OVERDRAFT PROTECTION FROM OUR SHARE ACCOUNT LYES NO							
Primary Owner				Date			
Joint Owner				Date			
	•						
Please send me an ATM/VISA				ıld like to sigi		11.50	
Check Card.		Direct Deposit Payroll Deduction Please send information.					
			Pleas	se sena intorm	auon.		

The Credit Union is hereby authorized to recognize any of the signatures subscribed below in the payment of funds or the transaction of any business for this account. The joint owners of this account hereby agree with each other and with the Credit Union that all sums now paid in on shares, or heretofore or hereafter paid in on shares by any or all of said joint owners to their credit as such joint owners with all accumulations thereon, are and shall be owned by them jointly, with right of survivorship and be subject to the withdrawal or receipt of any of them, and payment to any of them or the survivor shall be valid and discharge the Credit Union from any liability for such payment. The right or authority of the Credit Union under this agreement shall not be changed or terminated by said owners, or any of them except by written notice to the Credit Union which shall not affect transactions theretofore made.

I/We hereby authorize **Alcoa Pittsburgh Federal Credit Union** (the Credit Union) to establish this Checking account for me/us. The Credit Union is authorized to pay checks signed by me (or by any of us) and to charge all such payments against the shares in this Account. It is further agreed that:

- (a) Only share draft blanks and other methods approved by the Credit Union may be used to make withdrawals from this Account.
- (b) The Credit Union is under no obligation to pay a check that exceeds the fully paid and collected share balance in this Account. However, if any of the undersigned writes a check that would exceed such balance and result in this Account being overdrawn, the Credit Union may, nevertheless, pay such checks and transfer shares of this Account in the amount of the resulting overdraft, plus a service charge, from any other regular share account from which any of the undersigned is then eligible to withdraw shares.
- (c) The Credit Union may pay a check on whatever day it is presented for payment, notwithstanding the date (or any limitation on the time of payment) appearing on the check.
- (d) When paid, checks become the property of the Credit Union and will not be returned either with the period statement of this Account or otherwise.
- (e) Except for negligence, the Credit Union is not liable for any action it takes regarding the payment or nonpayment of a check.
- (f) Any objection respecting any item shown on a periodic statement of this Account is waived unless made in writing to the Credit Union before the end of 60 days after the statement is mailed.
- (g) This Account is subject to the Credit Union's right to require advance notice of withdrawal, as provided in its bylaws.
- (h) This Account is also subject to such other terms, conditions and service charges as the Credit Union may establish from time to time.
- (i) If this agreement is signed by more than one person, the persons signing below shall be the joint owners of the Account which, in that event, shall be subject to all terms and conditions printed on this application.