



OK MEMBERS FIRST FCU
10832 E. 31ST STREET
TULSA, OKLAHOMA 74146

IMPORTANT MESSAGE! IF YOU HAVE AN ATM OR DEBIT CARD AND DRAW YOUR ACCOUNT BALANCE NEGATIVE YOU WILL BE SUBJECT TO YOUR CARD PRIVILEGES BEING REVOKED. TO AVOID CARD CLOSURE COMPLETE OPT-IN FORM AND MAIL TO CREDIT UNION IMMEDIATELY.

Reg E Overdraft Opt In Form

Important Information affecting your Checking Account is Required

A recent change to your checking account was approved by the Federal Government affecting your ATM withdraws and one time Debit card transactions concerning your **BOUNCE PROTECTION COVERAGE**. Your action is required or your level of service will not be the same **Effective August 15, 2010 unless you opt in.**

The new regulation requires us to obtain your approval before we charge for your **ATM** withdraws or **ONE TIME DEBIT CARD TRANSACTIONS**, we may continue to pay your overdrafts by **BOUNCE PROTECTION** for other types of transactions, including checks, recurring debit card, and other electronic transactions up to \$300.00.

Overdraft Fees

- We will charge you a fee of \$25.00 each time we pay an overdraft.
- There is no limit on the daily fees we can charge you for overdrawing your account.

Most of our members already have overdraft from saving accounts which would cover your negative balance if you have sufficient funds in your savings. There is not a charge for the first six automatic transfers. A \$5.00 charge is assessed for all transfer over the six per calendar month. We also have a loan overdraft program that you can apply for. If you have any questions concerning these options please call the credit union.

How to Request Bounce Protection (overdraft) or Get More Information:

- Contact us at 918-663-2050 or Toll Free 800-375-9304
- If you want to OPT IN for our BOUNCE PROTECTION for ATM withdraws and ONE TIME DEBIT CARD TRANSACTION (overdraft) mail to:
OK MEMBERS FIRST FCU
10832 E. 31st Street
Tulsa, Ok 74146
- OR Fax to 918-663-8485

_____ I want BOUNCE PROTECTION (overdraft) for my ATM withdrawals and debit card purchases.

Signature _____

Printed Name _____

Date _____

Account # _____

Email to ivilla@okmembersfirstfcu.org