

TRANSFER AUTHORIZATION

SECTION I
CUSTOMER NAME / TITLE:
ADDRESS:
CONTACT NAME:

SECTION II	
<input checked="" type="checkbox"/> I (we) hereby authorize, Turkiye Vakiflar Bankasi T.A.O. New York Branch to debit to my (our) account indicated below to cover the transactions to be appeared as debit to the account, such; check withdrawals, ACH debits, loan settlements etc; This authorization will remain in effect until Turkiye Vakiflar Bankasi T.A.O. New York Branch receives a written instruction to cancel it.	
<input type="checkbox"/> Please make one time transfer between my (our) accounts indicated below with Turkiye Vakiflar Bankasi T.A.O. New York Branch.	
FROM ACCOUNT NO :	TYPE OF ACCOUNT <input type="checkbox"/> Checking <input type="checkbox"/> Money Market <input type="checkbox"/> Other _____

SECTION III		
TO ACCOUNT NO :	<input type="checkbox"/> Checking <input type="checkbox"/> Money Market <input type="checkbox"/> Other _____	
SIGNATURE:	TITLE:	DATE: