Print Form

FirstEnergy Family Credit Union
575 White Pond Drive, Suite E
Akron, OH 44320-1184

Virtual Branch (VB) Cross Member Transfer Authorization Form

VB Primary Account Number | | | | | |

VB Primary Member Name _____ Day Time Phone Number _____

Full Address _____

Please indicate the account(s) you would like to view in your Virtual Branch account. You must be a Primary Account Holder, Joint Account Holder or Custodian to link and view accounts. It is not necessary for the cross member account to be enrolled in Virtual Branch.

Name on Cross Member Account	Account #

I hereby authorize the FirstEnergy Family Credit Union to link the set forth accounts to my primary share account. This authorization cancels and supersedes any prior authorization signed by me and is to continue in effect until changed or cancelled by me in writing.

By signing this cross member authorization account form I state that I am a Primary Account Holder, Joint Account Holder or Custodian on above linked accounts.

_____ Current Date _____

Signed By

MAIL TO:

US Postal Address

FirstEnergy Family Credit Union
ATTN: VB
575 White Pond Drive, Suite E
Akron OH 44320-1184

FirstEnergy Corp. Interoffice mail code

A-FECU