

Balance Transfer Request

Please send a copy of your last statement on each account.

Upon approval, I/we wish to transfer the amount shown on the loan or credit card accounts(s) listed below as a Transfer of Balance to my Great Lakes Credit Union Visa credit card account.



Name (please print) _____ Joint Name _____

GLCU Account _____ Daytime Phone (_____) _____ Home Work Best time to call between 8AM-5PM CT: _____

Creditor _____ Address _____ Phone # _____

Account # _____ or Visa Card # _____ Amount to Transfer: \$ _____

Creditor _____ Address _____ Phone # _____

Account # _____ or Visa Card # _____ Amount to Transfer: \$ _____

Creditor _____ Address _____ Phone # _____

Account # _____ or Visa Card # _____ Amount to Transfer: \$ _____

X _____

Applicant Signature

X _____

Joint Signature

_____ **Date**

Transfers are not guaranteed, are subject to approval and available credit line. If you receive a statement from your creditor, please pay your minimum monthly payment to stay current on your credit card or loan because processing may take up to 3 weeks. GLCU is not responsible for inaccurate or incomplete information provided to us on this form.