



STCU Privilege Pay — Checks and ACH

This Privilege Pay Service Notice and Request outlines information about the overdraft protection service of STCU on your debit card and your request for such services.

How do I sign up for Privilege Pay – Checks and ACH?

You don't need to sign up for Privilege Pay on your checks and Automated Clearing House (ACH) transactions. The Privilege Pay service is provided to eligible members 90 days after membership opening. STCU provides this service to our valued members. If when you open your account you decide you would rather not have Privilege Pay on your checks and ACH items, please let us know by choosing the option "to waive" and completing the form below. Send the form to the address listed below.

If you have previously opted out of, or been ineligible for, Privilege Pay Checks and ACH but would now like to opt back into this service, please let us know by choosing the "option to re-instate" and completing the form below. Send the form to the address listed below.

STCU
P.O. Box 1954 Spokane, WA 99210-1954

Option to waive or re-instate Privilege Pay

Member name: _____ * Member number: _____

Please check one.

- No, I do not wish to have Privilege Pay checks and ACH extended to me. By signing and submitting this form, I understand that STCU will not cover overdrafts on checks and ACH transactions for the account listed below, beyond the already established overdraft sequence I have set up and that any items presented against insufficient funds in my checking or money market accounts will be returned unpaid with applicable NSF fees assessed. Additionally, I understand that if I wish to have Privilege Pay checks and ACH extended to me in the future, I must meet all eligibility requirements at that time.
- Yes, I meet eligibility requirements, and wish to have Privilege Pay checks and ACH extended to me. By signing and submitting this form, I understand that STCU will cover overdrafts on checks and ACH transactions for the account listed below, beyond the already established overdraft sequence, subject to the terms and fees as set forth in the Membership and Account Agreement.

Please indicate the account below
Personal or Business checking/money market account

* Account number: _____

Signature: _____

Date: _____

STCU use only

eSign	Doc reviewed:	eSign ID #:		Doc completed:	
	Employee:	OP #:	Branch:		Date:

*A Bar Code Sheet is required if the member number and account number are not typed.

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