

AUTHORIZATION TO SWITCH TO CREST REWARDS
CHECKING

Date: _____

Member Name: _____

Member Number: _____

I authorize Pacific Crest Federal Credit Union to change my existing PCFCU checking account to Crest Rewards Checking. I understand that I must meet the three (3) requirements: 10 check card transactions, 1 automatic clearinghouse (ACH) deposit or withdrawal, and enrollment with e-statements to qualify for the special dividend rate each month.

The 4.00% Annual Percentage Yield (APY) paid on balances between one penny and \$25,000, and 0.50% APY paid on all amounts above \$25,000 each cycle the minimum requirements are met. If you do not meet the requirements per cycle, your account will still function as a free checking account earning 0.15% APY; however, it will not receive ATM refunds for that time period. Rates as of February 1, 2008. We may change the interest rate and APY at any time after the account is opened. No minimum balance required. Available to personal accounts only. Monthly requirements are from the last business day of the month to the day before the last business day of the month. No monthly service charge. ATM refunds up to \$25 if requirements are met.

Member Signature _____

E-mail Address _____

OFFICE USE Received by _____ Acct Reviewed with Member _____

Process Date _____ Processed by _____

TELEPHONE CENTER Security Verification _____ Voice Recognition _____

Confirmation Notice Sent _____