



### Visa Balance Transfer Request

Please transfer the following credit card/loan balances to my 360FCU Visa® account

Name Of Creditor

Account Number

Street Address

City State Zip Code Amount Of Transfer

---

Name Of Creditor

Account Number

Street Address

City State Zip Code Amount Of Transfer

---

Name Of Creditor

Account Number

Street Address

City State Zip Code Amount Of Transfer

---

Name Of Creditor

Account Number

Street Address

City State Zip Code Amount Of Transfer

---

I understand any transferred balance(s) will be treated as a Visa cash advance under the current terms of the 360FCU Visa Credit Card Agreement.

Print Name (as appears on account)

Daytime Phone Number

Social Security Number

360FCU Visa Account Number

Signature

Date

Fax your request to the Electronic Services Dept at 860-627-4276  
Along with a copy of the bill(s) related to this transaction.  
Please allow for 7 to 10 business days for processing.  
Expedited delivery is not available.