



# Visa® Balance Transfer Form

# 1% Cash Rebate

on balance transfers\*

NO Balance Transfer Fees



Whichever card you carry,  
your APGFCU Visa really is the best deal in town!



### Visa Balance Transfer Terms and Conditions

1. You authorize Aberdeen Proving Ground Federal Credit Union (APGFCU) to pay off the balances or portions due on the credit cards/charges/loans referenced on the reverse by means of CASH ADVANCE charged to your APGFCU Visa. (Cash advances are always subject to FINANCE CHARGES from the date they are posted to your account to the date they are paid in full.)
2. You understand APGFCU is not responsible for any payments being late or lost in the mail nor is APGFCU responsible for any finance or other charges that may occur due to delay in transferring a balance. You also understand that there may be outstanding charges on the accounts being paid off and this Cash Advance may not pay off the total balance due.
3. You further understand that if there is an insufficient limit to your APGFCU Visa, APGFCU will pay off the balances in the order listed until the credit limit is exhausted. APGFCU reserves the right to refuse to honor any request.
4. If you have additional balances you wish to pay off, please attach a list with the information we requested on the reverse side of this form. Balance transfers of other APGFCU loans are not eligible for this promotion.
- \*5. Balance transfer rebate offered on first two transfers, per card, per year.

## Save Money and Make Money



Go ahead--start saving today! Simply complete the form below and return it to any branch or mail it in with your next Visa payment. We'll do the rest. There's absolutely no fee for this service. And, you'll get 1% cash back on your transferred balances!

Credit Card/Loan Issuer: \_\_\_\_\_

Account Number: \_\_\_\_\_

Payment Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Specific Amount to be Paid: \_\_\_\_\_

Credit Card/Loan Issuer: \_\_\_\_\_

Account Number: \_\_\_\_\_

Payment Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Specific Amount to be Paid: \_\_\_\_\_

Credit Card/Loan Issuer: \_\_\_\_\_

Account Number: \_\_\_\_\_

Payment Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Specific Amount to be Paid: \_\_\_\_\_

Member Name: \_\_\_\_\_

Member Number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

By signing above, I authorize APGFCU to transfer the balances as indicated to my APGFCU Visa account. I have read and agree to the terms of the offer on the reverse side of this form. [Note: This is not a Visa credit card application. If you DO NOT have an APGFCU Visa, please contact us for an application. Visa credit subject to approval.] Bring this form into any APGFCU branch or mail it to APGFCU, ATTN: Visa Department, PO Box 1176, Aberdeen, MD 21001-6176

