



3964 Fulton Drive, Canton, OH 44718 • 330-526-2075
5995 Mayfair Road, North Canton, OH 44720 • 330-526-2070
www.dncfcu.com

Visa Balance Transfer

Account Type Visa MasterCard Discover Other
Creditor Name _____
Account Number _____ Amount to be paid \$ _____
Payment Address _____
City _____ State _____ Zip _____

Account Type Visa MasterCard Discover Other
Creditor Name _____
Account Number _____ Amount to be paid \$ _____
Payment Address _____
City _____ State _____ Zip _____

Account Type Visa MasterCard Discover Other
Creditor Name _____
Account Number _____ Amount to be paid \$ _____
Payment Address _____
City _____ State _____ Zip _____

By signing below I understand transfers take about two weeks to complete. Please continue to make payments on your other credit cards until you see the transfer has been completed. Payment of the amount(s) authorized by you may or may not satisfy any outstanding balance(s) on the designated account(s). DNCFCU is not responsible for any remaining balance(s) or additional charges with regard to such account(s), nor for any charges resulting in any delay in the payment and transfer of balances. The total amount(s) paid and transferred cannot exceed your credit line. DNCFCU reserves the right to refuse any balance transfer requests or revoke promotional rates. The promotional rate will remain in effect until the transfer balance is paid off in full. Any other purchases or cash advances will be billed at the rate the member qualifies for based on his/her credit worthiness.

Member's Signature _____ Date _____
Member # _____ Visa Account Number _____ - _____ - _____ - _____