



CIF #

FirstLine Transfer Authorization

Customer Name: _____ Date: _____

Transfer From:

Transfer To:

Account Number	Account Name	Account Number	Account Name
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Transfer From Excludes: 90 Day Savings, Christmas Savings, IRAs, CDs and Loans (except HELOCs)

Transfer To Excludes: IRAs and CDs

Account holders assume full responsibility for and indemnify and hold harmless Community First Bank against liability for honoring any requests for the transfer of funds between any of the accounts listed above.

Signature

Signature

Rec'd By:
Verified By: