

IMPORTANT INFORMATION FOR MEMBERS ABOUT YOUR T.E.S. CREDIT UNION ACCOUNT

WHAT YOU NEED TO KNOW ABOUT OVERDRAFTS AND OVERDRAFT FEES

An overdraft occurs when you do not have enough money in your account to cover a transaction, but we pay it anyway. We can cover your overdrafts in two different ways:

1. We have standard overdraft practices that come with your account.
2. We also offer overdraft protection plans, such as a link to a savings account and Courtesy Pay, which may be less expensive than our standard overdraft practices. To learn more, ask us about these plans.

• What are the standard overdraft practices that come with my account?

We do authorize and pay overdrafts for the following types of transactions on a per case basis:

- Checks and other transactions made using your checking account number
- Recurring debit card transactions
- Automatic bill payments

If we don't hear from you, effective August 15, 2010, we will not authorize or pay overdrafts for the following type of transaction unless you ask us to (see below):

- Everyday debit card transactions

We pay overdrafts at our discretion, which means we do not guarantee that we will always authorize or pay any type of transaction.

If we do not authorize and pay an overdraft, your transaction will be declined.

• What fees will I be charged if T.E.S. FCU pays my overdraft?

Under our standard overdraft practices:

- We will charge you a fee of \$25 each time we pay an overdraft.
- Also, there is no limit on the total fees we can charge you for overdrawing your account.

• What if I want T.E.S. FCU to authorize and pay overdrafts on my everyday debit card transactions?

If you want us to authorize and pay overdrafts on everyday debit card transactions, please call 318-681-4335, visit www.tesfcu.org, or complete the form below and present it at our office or mail it to:

T.E.S. Regional Healthcare FCU
2050 Line Avenue
Shreveport, LA 71104

Without your permission, any overdrawn purchases made with your debit card, or ATM withdrawals exceeding your balance, will be DECLINED beginning August 15, 2010.

----- Please cut along dotted line -----

Yes! Please provide the overdraft service for my debit card and ATM transactions.

No, I would prefer to have my debit card purchases and ATM transactions DECLINED if my account is overdrawn.

Printed Name: _____

Date: _____ Account Number: _____

Signature: _____

