



Balance Transfer Form

MasterCard Platinum and Platinum Rewards Cards

Name: _____ Account #: _____

Please complete and return to USC Credit Union using one of the following methods:

Email: usccu@usccreditunion.org

Fax: (213) 821-7151

Mail: PO Box 512718, Los Angeles, CA 90051-0718

| Transfer #1 | |
|--|---------------------|
| Account Number | Amount to Transfer |
| Card Issuer (Name of Bank, Store, Company, etc.) | Issuer Phone Number |
| Issuer Address (Street, City, State, Zip) | |
| Transfer #2 | |
| Account Number | Amount to Transfer |
| Card Issuer (Name of Bank, Store, Company, etc.) | Issuer Phone Number |
| Issuer Address (Street, City, State, Zip) | |
| Transfer #3 | |
| Account Number | Amount to Transfer |
| Card Issuer (Name of Bank, Store, Company, etc.) | Issuer Phone Number |
| Issuer Address (Street, City, State, Zip) | |
| Transfer #4 | |
| Account Number | Amount to Transfer |
| Card Issuer (Name of Bank, Store, Company, etc.) | Issuer Phone Number |
| Issuer Address (Street, City, State, Zip) | |

Acknowledgement: By signing below, I understand that the processing of my balance transfer can take up to four weeks from the date the request is received by USC Credit Union. Balance transfers are processed in the order listed above and for the amount requested, up to my available credit line, and cannot be used to pay any of my existing USC Credit Union accounts. I am aware that I must continue to make payments directly to my card issuer(s) until the paid balance reflects on my card issuer's statement. I understand that I will not earn rewards points on the above balance transfers. USC Credit Union share and loan accounts must be in good standing at the time of this request for balance transfers to be processed. See Credit Card Agreement and Truth-In-Lending Disclosure for additional information.

Signature: _____ Date: _____