

What You Need to Know About Overdrafts and Overdraft Fees

An **overdraft** occurs when you do not have enough money in your account(s) 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 other **overdraft protection plans**, such as a link to a savings account or an overdraft line-of-credit*, which may be less expensive than our standard overdraft practices. To learn more, ask us about these plans.

This notice explains our standard overdraft practices.

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

We do authorize and pay overdrafts for the following types of transactions:

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

We **do not** authorize and pay overdrafts for the following types of transactions unless you ask us to (see below):

- ATM transactions
- Everyday debit card transactions

We pay overdrafts at our discretion, which means we **do not guarantee** that we will always authorize and 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 Atlantic Financial FCU pays my overdraft?

Under our standard overdraft practices:

- If you overdraw your account we will charge you a fee of \$25.00 each time we pay an overdraft.
- There is **no limit** on the number of total fees we can charge you for overdrawing your account(s).

What if I want Atlantic Financial FCU to authorize and pay overdrafts on my ATM and everyday debit card transactions?

If you also want us to authorize and pay overdrafts on ATM and everyday debit card transactions, complete the form below and bring it to your local branch or mail it to:

Atlantic Financial FCU
Account Services Dept.
40 Schilling Rd
Hunt Valley, MD 21031

Note: You may change your election at any time by visiting or contacting your branch or by mail at the address provided above.

*Subject to credit approval.

I want Atlantic Financial FCU to authorize and pay overdrafts on my ATM and everyday debit card transactions.

Printed Name: _____

Member Number: _____

Signature: _____ Date: _____