

YES! I want to transfer the following credit card balances to my Bridge Credit Card:



EQUAL OPPORTUNITY
L E N D E R



Creditor Name & Address	Account #	Balance

_____ Last 4 digits of Credit Card _____
Cardholder Name

_____ Date _____
Cardholder Signature

Please complete and return slip to Bridge Credit Union. Please allow 2 weeks for processing. Please make current payment to listed creditor(s) if your due date falls within this time frame.



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