



BANK OF LAS VEGAS

TRANSFER AUTHORIZATION
Between DDA, MMA or Sav Accounts
Transfers can also be done on-line

Not to be used for Line of Credit transfers

Transfer from:

Account Name: _____

Account # _____

Transfer to:

Account Name: _____

Account # _____

Amount of Transfer: \$ _____

Signature of Authorized Signer

Date

Printed name of Authorized Signer

COMPLETE AND FAX TO YOUR PREFERRED OFFICE:

Black Mountain Office Fax# 702-990-5443
Desert Office Fax# 702-938-0509

Decatur Office Fax# 702-939-2415
Red Rock Office Fax# 702-948-3630

Bank Use: Date transfer completed: _____ By: _____