



CHANGE AUTOMATIC WITHDRAWAL/PAYMENT

Date

Name of Company that initiates automatic withdrawal/payment

Address of Company

City, State, Zip of Company

To Whom It May Concern:

Your company is currently withdrawing \$_____ (*amount*) for
account _____ (*account number*) on the ____ day of the month.

Effective _____ (*date*), please change my automatic deduction from my old account:

Name of previous financial institution _____

Routing number _____

Account number _____

To my new account:

Corporate America Family Credit Union

Routing Number 271987075

Member Number/Account Number _____

Savings Account _____ or Checking Account _____ (*check one*)

If you have any questions concerning this request, please contact me at
(____) _____.

Thank you for your prompt attention to this request.

Sincerely,

Name (print)

Signature

Address

City, State, Zip