Change Automatic Payments/Withdrawals

Make copies of this form as needed.

TELCO✝PLUS
credit union
Your financial solution.

_____
Date

_____
Name of Company That Makes Automatic Withdrawal

_____
Address

_____
City, State, Zip

To Whom It May Concern:
You are currently withdrawing $ _____ (amount) for account # _____
on the _____ day of month from the following account:

        Financial Institution Name: _____
        Routing Number: _____
        Account Number: _____
        Account Type: _____

Effective _____ (date), please stop making withdrawals from that account and instead, debit from:
        Financial Institution Name: _____Telco Plus Credit Union_____
        Routing Number: _____311985791_____
        Member Number: _____

If you have any questions about this request, please contact me during the
DAY/ EVENING (circle one) at (_____) _____ (phone number).

Thank you.
Sincerely,

_____
Name (please print)

_____
Address

_____
City, State, Zip