

# Automatic Payments Letter



## Easy Choice<sup>SM</sup> Switch Kit

*Complete and sign one copy of this form for each automatic payment and mail them to the companies currently authorized to take automatic payments from your account. This form will notify the companies that you wish to have your automatic payment transaction redirected to Allegis Credit Union.*

Company Name

Address

Subject: Switching My Automatic Payments

Attention: Accounts Receivable Department

I have recently changed financial institutions and would like to have my automatic payments changed to my new account. Please discontinue debiting the account listed below and begin making automatic withdrawals from my new Allegis Credit Union account. Please feel free to contact me by mail or phone with any questions regarding this request. Thank you for your assistance in this matter.

Sincerely,

Authorized Signature (Required to authorize change)

Date

### Automatic Payment Information

Name	Phone: Day / Evening (circle one)
Address	City/State/Zip
Amount of Automatic Payment or "Amount Due"	My account number with your company

### Financial Institution Information

Previous Financial Institution Name	Routing Number	Account Number
<b>Allegis Credit Union</b>	<b>272481884</b>	
New Financial Institution Name	Routing Number	Account Number