

AUTOMATIC PAYMENT/DEPOSIT TERMINATION

I hereby direct Southwest Colorado Federal Credit Union to terminate credit / debit (*circle one*) entries to my (our) account indicated in my previously given authorization. I (we) acknowledge that the origination/termination of ACH transactions to my account must comply with the provisions of U.S. law.

TO
FINANCIAL INSTITUTION INFORMATION:

NAME: _____

ADDRESS/CITY/STATE/ZIP: _____

ROUTING NUMBER: _____ ACCOUNT NUMBER: _____

ACCOUNT TYPE: CHECKING SAVINGS LOAN (*CIRCLE ONE*)

FROM
PAYMENT INFORMATION:

STARTING DATE _____ DOLLAR AMOUNT: _____

FREQUENCY (CIRCLE ONE): ONE TIME or MONTHLY on the _____ of each month

NAME: _____

ADDRESS/CITY/STATE/ZIP: _____

ROUTING NUMBER: _____ ACCOUNT NUMBER: _____

ACCOUNT TYPE: CHECKING SAVINGS LOAN (*CIRCLE ONE*)

If another financial institution is receiving (credit) these funds, the funds will be withdrawn from your account a day prior to the date noted on this form.

If another financial institution is sending (debit) these funds to your account, the funds will be sent a day later than noted on this form.

SIGNATURE: _____ DATE: _____

PHONE NUMBER: _____