



**Greater Cincinnati
Credit Union**

AUTOMATIC PAYMENT

SWITCH KIT FORM

USE THIS FORM TO NOTIFY A COMPANY OF YOUR REQUEST TO REDIRECT YOUR AUTOMATIC PAYMENT TO BE DEDUCTED FROM YOUR CREDIT UNION ACCOUNT.
PLEASE COMPLETE (1) FORM FOR EACH PAYMENT YOU WISH TO CHANGE.

Step 1

Complete this form.

Step 2

Submit this form to each company that you want to automatically debit payments from your account.

TO:
Company Name: _____
Company Address: _____
City: _____ State: _____ Zip: _____

FROM:
Customer Name/Name on Account: _____
Customer Account / Billing Number: _____
Customer Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____

Please complete one of the following:

Redirect My Automatic Payment to Begin Deducting From my Greater Cincinnati Credit Union Account:
_____ **Immediately** -or- _____ **Beginning On:** _____ **(Date)**

The Account I Would Like My Automatic Deduction to Be Paid From: _____ Savings -or- _____ Checking

My Credit Union Account No: _____

Credit Union A/B/A Routing No: _____ **2420-7667-2** _____

I authorize the company named above to process my automatic payment from Greater Cincinnati Credit Union for the purpose of withdrawing funds from my account designated above and to initiate, if necessary, any debit or credit entries to correct any erroneous debits from my account. I acknowledge that the origination of ACH transactions from my account must comply with the provisions of State and U.S Law as applicable.

CUSTOMER SIGNATURE: _____ **Date:** _____