



Authorization to Change Automated Payment

To whom it may concern:

Please take this as written communication to change my automated payment with your company over to my new checking account at APGFCU.

Member Information

Name:

Account Number (with Company):

APGFCU Checking Account Number:

APGFCU Routing Number: 255075576

APGFCU Address: P.O. Box 1176, Aberdeen, MD 21001-6176

Please contact me at _____ or APGFCU at 800-225-2555 with any questions and send me a written confirmation of when the change will be effective.

Signature

Signature:

Co-signer Signature:

Date: