SWITCH KIT 9

AUTHORIZATION TO TRANSFER AUTOMATIC PAYMENTS

Complete this authorization to have automatic withdrawals made from The Tennessee Credit Union account. Print one authorization for each company that you wish to make automatic withdrawals from your account. Remember to change any automatic payments made by debit cards.

Date	1025
Company making Automatic Withdrawals	PAY TO THE ORDER OF
Address	MEMO
City/State/Zip	Routing Number Account Number Check
To Whom it May Concern:	
You are currently withdrawing \$ (amount) on (what payment is for) from:	a (when) basis for my
Old Bank/Credit Union:	
Account Number: or Card I	Number:
Routing Number:	
Please discontinue withdrawals from the above.	
☐ Begin withdrawals from my new checking account a	at:
The Tennessee Credit Union Rou	ting Number: 264080853
1400 8 th Avenue South, Nashville, TN 37203 Che	ecking Account Number:
☐ Begin charging my The Tennessee Credit Union cred	dit card:
Card Number:	Expiration Date: CVV:
$\ \square$ I will use The Tennessee Credit Union's Bill Pay to r	nake future payments.
If you have any questions regarding this request, pleas	se contact me using the information below:
Signature:	
Name:	
Address:	
City/State/Zip:	THE TENNESSEI
Phone Number:	ttcu.org 800-622-2535

P.O. Box 22881 Nashville, TN 37202