



2218 Walbert Avenue · Allentown, PA 18104 · Phone: 610-435-7575 · Fax: 610-435-2910

CHANGE OF PREAUTHORIZED AUTOMATIC WITHDRAWAL

Date: _____

To Whom It May Concern:

Due to a recent change in my/our banking relationship I/we authorize the change of preauthorized automatic payment(s) from my old checking/savings account to the new checking/savings account held at Lehigh Valley Federal Credit Union. Please find the necessary information to fulfill this request below:

This is in reference to the account I/we hold with your company:

Company Name _____

Address _____ City _____ State _____ ZIP _____

Previous Financial Institution: _____

Routing Number: _____

Account Number: _____

Please stop making withdrawals from the previously mentioned account and instead make them from:

Financial Institution: Lehigh Valley Federal Credit Union

Routing Number: _____ 231378983

Account Number: _____

If you have any questions about this request, please contact by calling:

Day Number: _____ Evening Number: _____

Thank you!

Sincerely,

Name

Address

City/State/ZIP



*You are responsible for the accuracy of the information you provide. LVFCU has no control over the amount of time it will take your contact to process your request so you should plan interim payments accordingly.