

REDIRECT AUTOMATIC PAYMENT FORM

Date

Name Of Company That Makes Automatic Withdrawal

Address

City, State, Zip

To whom it may concern:

You are currently withdrawing \$ _____ for my _____,
(amount) (payment type/description)

_____ on _____ from the following account:
(account # or other identifying number) (date of withdrawal)

Old Financial Institution: _____

Routing Number: _____

Account Number: _____

Please stop making withdrawals from that account and instead make them from:

New Financial Institution: **Houston Texas Fire Fighters FCU**

Routing Number: **313083714**

Account Number: _____

If you have any questions about this request, please contact me during the DAY / EVENING.
(circle one)

at (_____) _____ - _____
(phone number)

Thank you for your assistance.

Sincerely,

Signature

Name (Please print)

Address

City, State, Zip

Instructions: Use this form to change your automatic withdrawals from your existing financial institution to Houston Texas Fire Fighters Federal Credit Union.

Once we receive the completed form, we will submit it to each company you specify below.

Complete one form for each automatic withdrawal.



**Houston Texas Fire Fighters
Federal Credit Union**
Family. Trust. Service. Prosperity.