Automatic Payment Transfer Form

Your Share Draft (Checking) Account comes with free online BillPay. However, if you would like us to transfer your existing payments with individual companies (utilities, mortgage, credit card, etc.), then print, complete, sign, and return this form to each company. Make additional copies of this form as necessary.

Please note—keep copies of all documents for your personal records.

Payee/Company Information:		
Date: Name of Paye	ee:	
Address:		
City:		Zip:
Instructions:		
I would like to change my payment instru	ctions for Account #:	
Currently, you are debiting payment fror	m my old bank account at:	
Name:		
	Account #:	
As of(date), plea Michigan Tech Employees Federal Cred	se stop debiting this account and start	
My New Information:		
New ABA Routing #: 291172682		
New MTEFCU Account #:		
Michigan Tech Employees Federal Cree 700 E. Sharon Ave. Houghton, MI 49931 ABA Routing Number 291172682	dit Union	
Please send me a written confirmation of the	e date this change will be effective o	n your system.
Sign: X PRIMARY ACCOUNT HOLDER (SIGN)	Print Clearly:	IMARY ACCOUNT HOLDER (PRINT)
Address:		
City:		Zip: