

Automatic Payment Change/Transfer

When transferring your withdrawal(s), allow 30 days before your new automatic withdrawal takes effect. Upon completion, mail this form to the financial institution(s) or company(ies) currently drafting your account (i.e. Credit Card company, Mortgage holder, Utility company, Insurance company, etc.).

Company or Financial Institution

Complete Address

City, State, Zip

To Whom It May Concern,

You are currently withdrawing \$_____ (dollar amount) for the payment of my _____ (Auto, Credit Card, Insurance) on _____ (Date of Withdrawal) from the account listed below:

Financial Institution: _____

Routing/Transit Number: _____

Account Number: _____

Please stop drafting the above account and begin drafting to the account listed below:

New Financial Institution: AppleTree Credit Union

Address: Member Services Department

11333 W. Greenfield Ave.

West Allis, WI 53214

Phone #: (414) 546-7800

AppleTree Routing #: **2750-8247-1**

Checking Account #: **8** _____ (10 digits)

Money Market Account#: **7** _____ (10 digits)

Savings Account #: _____ (4/5 digits)

If you have any questions regarding this request or require additional information, please contact me during the DAY/EVENING (circle one) at _____ (phone #).

Thank you for your assistance.

Sincerely,

Name (print)

Signature

Please contact us at 414-546-7800, or stop by one of our branches, if you have any questions about this or any of the forms.