

UNITY CREDIT UNION

Automatic Payment Change Form

Give this to Company/Payee

Please route this automatic payment per my instructions:

Company to receive payment _____ Account Number _____

Company Address _____

City _____ State _____ Zip _____

Payment Amount \$ _____

Monthly

Bi-Weekly

Weekly

I authorize my automatic payment to be debited from my Unity Credit Union account effective
____/____/____.

Unity Credit Union Routing Number: 272079429

Account Number _____

Savings

Checking

Authorized Signature(s) _____ Date _____

Authorized Signature(s) _____ Date _____

UNITY CREDIT UNION

Serving Members Since 1954

MAIN OFFICE

7240 East Twelve Mile Road • Warren, MI 48092
586-573-4110 • Fax: 586-573-2593

BRANCH OFFICE

25901 Harper • St Clair Shores, MI 48081
586-771-4260 • Fax: 586-771-6880

www.unitycu.com