

AUTOMATIC PAYMENT LETTER

To Whom It May Concern,

, ,	stitutions and I hereby authorize you to to over to my new account at Sharefax
Credit Union, routing number 242077312, account number	
My account information is as follows	
Name:	
Account Number:	
Please contact me at	or Sharefax Credit Union at
800-733-1SCU (1728) with any ques	stions.
Thank you,	
Name:	
Address:	
City State 7in:	