

Change Notice for Automatic Withdrawal

To: _____ Attention: _____
(Business that makes automatic withdrawal.) (If you have a contact name, include here.)

Address: _____

City: _____ State: _____ Zip: _____

You currently automatically withdraw \$ _____ weekly, bi-weekly or
 monthly from the financial institution listed below for my (enter reason for withdrawal:
auto loan, electric, etc.): _____

My account number with you is: _____

Financial Institution Name: _____

Financial Institution Routing Number: _____

My Financial Institution Account Number: _____

Effective immediately discontinue making the withdrawal out of the above referenced
financial institution and begin to make the withdrawal from:



CSC FCU
530 E Market St
Danville, PA 17821
570-275-3308

CSC FCU Routing Number: 231380298

Account Number: _____

(Enter your CSC FCU checking account number.)

If you have questions, call me at _____ (daytime) or _____ (evening).

This change is authorized by (print name): _____

Signature: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____