

Automatic Withdrawal (ACH) Authorization

Date _____

To Company Making Withdrawal _____

Attn: _____

Mailing Address _____

City, ST, Zip _____

From _____

Mailing Address _____

City, ST, Zip _____

To Whom It May Concern:

I have changed financial institutions and am now a member/accontholder of Carolina Trust Federal Credit Union. You are currently withdrawing \$_____ (or paying my current bill amount) from the following account:

Old Financial Institution _____

Routing Number _____ **Account Number** _____

For (Payment Reason) _____

On (Approximate Date of Month) _____

Please stop making withdrawal(s) from this account on _____ and begin making the withdrawals(s) into my new account at **Carolina Trust Federal Credit Union**.

New Credit Union Account Number _____

New Routing Number: 253279510

I hereby authorize _____ to make the above-mentioned withdrawal from my account at Carolina Trust Federal Credit Union.

If you have any questions, please contact me at _____.

Signature

Date