



## Automatic Payment Change Authorization Notification

**Forward completed form to any company that is automatically withdrawing funds from your checking account at your previous financial institution.**

Name: First	MI	Last	Suffix
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Company	Account Number
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Previous Financial Institution
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New Financial Institution <b>Deer Valley Credit Union</b>	Street <b>16215 N. 28th Ave.</b>	City <b>Phoenix</b>	State <b>AZ</b>	Zip Code <b>85053-3040</b>
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Deer Valley Credit Union Routing Number <b>322172807</b>	Deer Valley Credit Union Account Number
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I authorize this change in automatic payment, effective \_\_\_\_\_(enter date).

This authorization is to remain in effect until the payment office receives notification from me to terminate this automatic payment.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_