

# Automatic Withdraw Change Authorization

Complete and sign this form for each automatic withdraw currently coming out of your old account. Be sure to keep your old account open until you see the automatic withdraw take place under your new First Commonwealth account.

COMPANY NAME

ACCOUNT NUMBER AND/OR CUSTOMER NUMBER

LAST NAME

FIRST NAME

MIDDLE INITIAL

STREET ADDRESS

CITY

STATE

ZIP

WORK PHONE

HOME PHONE

MOBILE PHONE

SSN (if applicable)

AMOUNT WITHDRAWN

## **OLD ACCOUNT INFORMATION:**

PREVIOUS ACCOUNT NUMBER

OLD BANK NAME

## **NEW ACCOUNT INFORMATION:**

**231379199**

NEW ROUTING NUMBER

**First Commonwealth Federal Credit Union**

NEW BANK NAME

CHECKING

SAVINGS

NEW ACCOUNT NUMBER:

Please make this change effective: \_\_\_\_\_

SIGNATURE

DATE