



P.O. Box 15038, Pittsburgh, PA, 15237 (412)369-3800, Fax: (412)369-3828

Experience the Difference!

I'm Making the Switch to OMEGA Federal Credit Union.
Automatic Payment Transfer Request

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Company Receiving Payment: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Account Number: _____

Please Change my Automatic Payment to withdraw from: OMEGA Federal Credit Union
PO BOX 15038
Pittsburgh, PA 15237

My OMEGA Federal Credit Union Account Number is: _____

OMEGA FCU's Routing Number is: **243083347** Account type: _____
(Savings or Checking)

Please discontinue automatic payment withdraw from: _____

Address of Financial Institution: _____

City: _____ State: _____ Zip: _____

Account Number: _____ Routing Number: _____

Automatic Payment Amount: \$ _____

I understand I need to give you at least 2 weeks notice prior to the next scheduled transaction. Therefore, I expect the last payment withdrawal from my previous financial institution to be dated: _____. All transactions after this date should be paid from my OMEGA federal Credit Union account listed above.

I hereby authorize the above to change to my account (s). It is understood that a photocopy of this form will also serve as authorization.

Name: _____ Signature: _____ Date: _____

Please maintain a balance in your old account to cover any outstanding withdrawals. OMEGA FCU is not responsible for charges incurred for insufficient funds. Please mail this form to automatic payment withdraw company and keep a copy for your records.

