

AUTOMATIC PAYMENT CHANGE

METRO: 651.215.3500
TOLL FREE: 888.34.SPIRE
ONLINE: www.myspire.com
FAX: 651.647.0582


SPIRE[®]
CREDIT UNION

Please change my automatic payment information to my new financial institution, SPIRE Credit Union.

COMPANY RECEIVING PAYMENT

Company Name:

Company Address:

City, State, Zip

Name on Account:

Account Number:

CURRENT FINANCIAL INSTITUTION

Current Financial Institution:

Current Financial Institution Address:

City, State, Zip

Current Financial Institution Phone:

Current Account Number:

Amount of Payment:

NEW FINANCIAL INSTITUTION

SPIRE Credit Union

2025 Larpenteur Ave. W.
Falcon Heights, MN 55113
651.215.3500

New Routing Number:

291075116

New Account Number:

Payment From:

Savings

Checking

AUTHORIZATION OF CHANGE

I authorize this change in automatic payment effective:

Month:

Day:

Year:

Applicant's Signature

Date

X

SUBMIT TO PAYEE

