



Automatic Payment Through An External Account

Member Name:	
Financial Institution Name:	
Routing Number:	
Checking Account Number:	
	t be one day before the first payment date):
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the a	I hereby authorize All One Credit Union to charge bove referenced account for my monthly loan payment.
Signature of Applicant	Date
Signature of Co-Applicant	Date
Attach a <u>voided</u> check	
OFFICE USE ONLY	
Loan Account Number	
Entered By	Date



