



# ACH UPDATE FORM

Member Number/Account ID #	
Member Name	
Transfer Record Number	

### Dollar Amount Change

Only needed for existing fixed or principle payments  
To add new principle payment, fill out ACH Authorization Form.

Current Dollar Amount

New Dollar Amount

### ACH Transfer Date Change

Current Transfer Date

New Transfer Date

### Bank Information Change

\* You must be a signer on this account

Checking

Savings

Routing Number (9 digits)

Account #

### Cancel Automatic Transfer

Date Cancellation is Effective

As of the date listed above, I hereby request Oregon Community Credit Union to terminate the authorization agreement covering the preauthorized debit/credit to my account. Please be advised that I no longer authorize Oregon Community Credit Union to initiate the above listed entry to my account and personally indemnify the Credit Union from any and all liability associated with the non-initiation of this item.

***I understand that I need to provide this written ACH Authorization Update at least ten (10) business days prior to the scheduled transaction date, in order to afford the Credit Union reasonable opportunity to act upon this request.***

Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_