

## Mountain America Credit Union Authorization for Pre-Authorized Payments:

Member Name		Financial Institution
Email		Account #
(to confirm auto pay setup)		Routing #
Social Security #		Payment coming from ☐ Checking ☐ Savings
Phone #		Other
Vehicle Make	/ Year	Monthly payment amount \$
Vehicle Model		monthly payment amount $\phi$
VIN		
Automatic Payment Ackno	wledgement:	
indicated at the financia	I institution named above	Union to initiate debit entries to my (our) account e. I (we) further authorize Mountain America Credit the monthly payment listed above on the loan due
(Note: If the transfer dat		of today. nday or holiday, debits will occur on the previous e month, debits will occur on the following
or until Mountain America written notification to me Mountain America Credito act on it. I (we) further	ca Credit Union has receive (us) of its termination in tunion and the financial	refect until either the loan(s) has been paid off, wed written notification from me (us) or sent in such time and in such manner to afford institution being debited reasonable opportunity rigination of ACH transactions to my (our) law.
Name	Signature	Date
<b>DEALERSHIP:</b> Please provide a	copy of this form to the meml	per.