

REQUEST TO CHANGE PAYMENT METHOD

Name: _____ Daytime Phone: _____

New payment method: Payroll Deduction*
 Coupon
 Cash
 Auto-Transfer** From: Account #: _____

Loan Number	Start Date	Due Date	Amount

*Visa automatic transfer payments can be scheduled an amount exceeding the minimum payment. If this option is not requested, payments will be calculated at a minimum of 3% of the outstanding balance or \$25.00 whichever is greater.

***I understand and agree to the following terms and conditions for payroll deduction: 1.) The payment of my loans with POPA Federal Credit Union is my responsibility. 2.) I understand that authorizing payroll deduction for loan payments is merely a method of facilitating payments. 3.) I also understand that it is my own responsibility to ensure that loan payments are made in a timely manner as detailed in the loan agreements that I have signed. 4.) I further understand that the County of Los Angeles will attempt to comply with my requests for payroll deductions, but does not guarantee compliance.**

****I understand and agree to the following terms and conditions for auto-transfers: 1.) If funds are insufficient to post a transfer, then on subsequent business days, POPA will make continuous attempts to post the transfer until it is completed; 2.) Transfers only post from the account(s) indicated, provided the transfer does not exceed savings account limitations set forth by applicable regulations; 3.) To cancel a transfer, you will notify us in writing five (5) business days prior to the scheduled transfer date; 4.) POPA reserves the right to terminate your participation in this program; 5.) This form is intended for recurring transfers between POPA Federal Credit Union accounts and supersedes all others.**

Borrower Signature _____ Date _____

Co-Borrower Signature _____ Date _____

For Credit Union Use Only:

Processed by: Name _____ Teller # _____ Date _____
 Comments: _____
