

Authorization for New Automatic Payment



Instructions: Send this form to your vendor

Name

Street Address

City, State, Zip

Daytime
Phone Number

Credit Union Name: BrightStar Credit Union Routing Number: 267078299
Credit Union Address: P.O. Box 8966
Fort Lauderdale, FL 33310-8966

Account Number: _____ Checking Account (13 digits) Savings Account (8 digits)

Vendor Name _____

Vendor Account Number _____ Payment Amount \$ _____

I (we) authorize _____ to debit my checking or savings account as given above each payment period.

Sincerely,

Signature: _____ Date _____

Second Signature (if joint account) _____

For additional information or help, contact us at:
954-486-2728 800-637-BSCU (outside Broward County)
www.bscu.org/contact