



Our Community | Your Credit Union
5665 N. Hamilton Road
Columbus, Ohio 43230
614-416-7588 Fax: 614-416-7580

Please print this page.

**POWERCO CREDIT UNION, INC.
VISA AUTO-PAY SELECTION FORM**

Name:	Date:
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I would like for my monthly VISA payment to be automatically deducted from my:

- Checking Savings

Name of Financial Institution _____

Routing and Transit Number _____

POWERCO VISA Account Number _____

Please select one of the following payment options:

- I would like the minimum monthly payment deducted.
- I would like a fixed payment amount of \$_____ deducted.
- I would like the entire statement balance deducted.

The payment option that you chose will be deducted on the tenth calendar day after the statement is generated.

Signature _____ **Date** _____

Complete this form and fax or mail to:
POWERCO Credit Union, Inc.
5665 N. Hamilton Road
Columbus, OH 43230
Fax: 614-416-7580