

VISA AUTOMATIC PAYMENT CHANGE REQUEST



PRIMARY CARDHOLDER NAME	CONTACT TELEPHONE	DATE										
VISA ACCOUNT NUMBER 4428 - 68												
<ol style="list-style-type: none"> 1. You will still receive a monthly Visa statement, your payment will be automatically deducted on the Visa payment due date. If there are insufficient funds to make a full payment, Boeing Employees' Credit Union (BECU) will not attempt to verify funds after the initial attempt. 2. You may make additional payments by using the remittance receipt provided with your monthly Visa statement; however, this may prevent your automatic payment from being deducted. 3. If funds are not available in your share or draft account to make your Visa payment, your Visa account will be charged a \$25 returned payment fee and your share or draft account may be charged a NSF fee. 												
Visa Automatic Payment Schedule												
<input type="checkbox"/> I hereby AUTHORIZE the Credit Union to deduct funds from the below BECU account to make my Visa payment.												
<input type="checkbox"/> Savings: <input type="checkbox"/> Checking:	<table border="1" style="width: 100%; height: 30px; border-collapse: collapse;"> <tr> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> </tr> </table>											
Payment Selection: <input type="checkbox"/> Minimum <input type="checkbox"/> Full Balance												
<input type="checkbox"/> I wish to make a CHANGE to my automatic payment option.												
<input type="checkbox"/> I wish to CANCEL the Visa automatic payment program.												
Important! I/We understand that I/We must sign and return this Visa Automatic Payment Change Request to BECU at least (15) days prior to the due date to go into effect for the same billing cycle. Please sign here to <i>AUTHORIZE</i> , <i>CHANGE</i> , or <i>CANCEL</i> your automatic payment.												
BORROWER SIGNATURE (REQUIRED)												
CO-BORROWER SIGNATURE												

If form is not submitted electronically, please return completed and signed form to:
 BECU, M/S 1081-2 PO Box 97050 Seattle, WA 98124-9750
 or fax to 206.805.5663