

## Automatic Transfer Cancellation

PRIMARY MEMBER NAME: \_\_\_\_\_

JOINT MEMBER NAME: \_\_\_\_\_

ACCOUNT NUMBER BEING DEBITED: \_\_\_\_\_

RECEIVING ACCOUNT NUMBER: \_\_\_\_\_

AMOUNT: \_\_\_\_\_

END DATE: \_\_\_\_\_

**It is expressly understood and agreed that if the borrower(s) cancel his/her pre-authorized transfer prior to paying off the loan, the Borrower will no longer be entitled to the discount(s) and the loan interest rate will be increased. The monthly payment shall remain the same as in the Credit Agreement, Promissory Note, Loanliner Agreement, Voucher or other evidence of the loan terms. For closed end loans, this may result in a higher final payment.**

EFFECTIVE IMMEDIATELY, PLEASE STOP THE ABOVE LISTED AUTOMATIC TRANSFER.

\_\_\_\_\_  
Member Signature

\_\_\_\_\_  
Date

**(For Office Use Only)**

\_\_\_\_\_  
Staff Signature

\_\_\_\_\_  
Receiving Branch

**Please return to:**  
Teachers Federal Credit Union  
PO Box 9005  
Smithtown, NY 11787-9005  
Attention: Member Services Department  
FAX: 631 648-2045  
E-mail: [webmail@teachersfcu.org](mailto:webmail@teachersfcu.org).