

United Catholics Federal Credit Union

2225 E. Garvey Ave N, West Covina, CA 91791

Phone (626) 974-4447, Fax (626) 974-4473

www.unitedcatholicscfu.org

AUTHORIZATION FOR LOAN PAYOFF

LENDER INFORMATION TO BE PAID

Lender Name: _____

Account Number: _____

Phone Number: _____ - _____
Area Code Telephone No.

Lender Address: _____

License Plate Number: _____

Make: _____

Model: _____

Vehicle Identification Number: _____

The undersigned hereby authorizes and directs you to accept from:

United Catholics Federal Credit Union

PO Box 210

West Covina, CA 91793-0210

or order, the payoff due you on my account in the amount of \$ _____ good
through: _____ and authorize you to surrender to them, or order, the properly
endorsed Certificate of Ownership to the above described vehicle.

Print Name: _____

Signature: _____ Date: _____

Authorized Signature on Loan