



ICON Credit Union
1010 N. Rose Street
Boise, ID 83703
(208) 344-7948 1-800-877-3174

Visa Credit Card
Autopay Cancellation
Request

Yes, I would like to CANCEL my ICON Credit Union credit card payment from automatic payment.

Name _____ Date _____
(as it appears on credit card)

Credit Card Account Number _____

I have my payments automatically withdrawn from my **ICON Share Draft** account

Member # _____ ID# _____

I would like to cancel this automatic payment. I will continue to make my scheduled payment by other methods. I am giving you at least 10 business days before the scheduled date of the payment to cancel this auto pay.

SIGNATURE _____ DATE _____

SIGNATURE _____ DATE _____

F/M Completed.
Date: _____ By: _____