

AUTHORIZATION FOR AUTOMOBILE PAYOFF

DATE: _____

I (WE) _____

AUTHORIZE SIMPLOT EMPLOYEES CREDIT UNION TO MAKE PAYOFF TO:

ACCOUNT#: _____

ON MY (OUR):

(YEAR) _____

(MAKE) _____

(MODEL) _____

VIN: _____

BALANCE DUE \$ _____

PLEASE RETURN TITLE TO THE ABOVE VEHICLE TO:

SIMPLOT EMPLOYEES CREDIT UNION

PO BOX 1059

CALDWELL, ID 83606-1059

Signature

Signature