

# AUTOMATIC PAYMENT REQUEST FORM

*Please complete this section with the company's information that makes withdrawals from your account.*

Company Information			
<b>Company Name</b>			
<b>Company Address</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
<b>Company Phone Number</b>			

*Please attach a voided check for reference. You can obtain temporary checks from a representative.*

To Whom it May Concern:	
You are currently withdrawing	\$
For my loan, insurance, etc.	
Account Number:	
On Month/Day of withdrawal:	
From (Previous Bank Name)	
Previous Bank Routing Number	
Previous Bank Account Number	
<b>Please stop making withdrawals from that account and instead make them from</b>	
<b>Name of Current Bank</b>	
<b>Routing Number</b>	<b>Account Number</b>

*Simply sign and pair with a voided check. Give both items to the company that withdraws from your account.*

Thank you.			
<b>Signature Here.</b>			
<b>Printed Name</b>		<b>Contact Phone Number</b>	
<b>Address</b>	<b>City</b>	<b>State</b>	<b>Zip</b>