

Authorization for Automatic Payments Notification of Change

Date	
To	
Address	
City, State, Zip	

Re: Billing Account Number	
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Current Bank Information

Bank Routing Number	
Account Type	
Account Number	

Effective _____ please use the following information to process my automatic payments.

PLEASE CHANGE TO:

Union State Bank

Bank Routing Number	073903150
Account Type	
Account Number	

Requested By:

Account Holder	
Address	
City, State, Zip	
Social Security Number	
Daytime Phone Number	
Other	

Signature

Date

*I have enclosed a voided check or deposit ticket to help process this request.