

# NOTICE OF AUTOMATIC WITHDRAWAL CHANGE

*Send this form to all companies with whom you have arranged automatic payments.*

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

## To Whom It May Concern:

I have recently changed my primary financial institution to First Community National Bank.

You are currently withdrawing \$ \_\_\_\_\_ (amount) from the following account:

Financial Institution Name	Routing Number	Account Number

The payment is for billing account # \_\_\_\_\_ on (date) \_\_\_\_\_.

Please begin withdrawing this payment from my account with **First Community National Bank**.

Account Type (Checking or Savings)	Account Number	Routing Number
		081510593

**This change is effective immediately.**

If you have any additional questions, please contact me:

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State/Zip

\_\_\_\_\_  
Date

\_\_\_\_\_  
Social Security Number or Employee ID (if applicable)

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Email