



Automatic Payment Change Form

Complete this form for each company or organization with whom you have arranged for automatic payment. Once completed, mail the form(s) directly to the company or organization.

I _____ have closed my checking account with
(Your Name)

_____ effective _____.
(Current Bank) (Date)

I hereby authorize my automatic withdrawal in the amount of \$ _____ to be changed from my current checking account # _____ at _____ to my new **National Bank & Trust** account as listed below.

Checking Account # _____

ABA Routing # _____ 113104534 _____

Effective Date _____

Amount to be withdrawn: \$ _____

Date of withdrawal: _____

If you have any questions or if there is a penalty or fee, please contact me at:

(_____) _____ - _____

Thank you for your attention to this matter,

Customer Signature

Joint Account Holder Signature

Date

Date

Attach a New National Bank & Trust Voided Check Here

