



# Change Automatic Payment

*This form allows you to notify businesses receiving electronic payments that you have a new bank account number.*

\_\_\_\_\_  
Date

\_\_\_\_\_  
Business Name

\_\_\_\_\_  
Address City State Zip code

**Please discontinue withdrawing \$ \_\_\_\_\_ (amount) on \_\_\_\_\_ (date) from the following bank account:**

Financial Institution: \_\_\_\_\_

Routing Number: \_\_\_\_\_

Account Number: \_\_\_\_\_

**And, begin making them from my new account:**

Financial Institution: First National Bank & Trust

Routing Number: 091101730

Account Number: \_\_\_\_\_

**If you have any questions, please contact me at:** (phone number) \_\_\_\_\_ Day Evening

\_\_\_\_\_  
Name

\_\_\_\_\_  
Billing address City State Zip Code

\_\_\_\_\_  
Signature (sign in the presence of a notary public)

**Notary Public (If required by your financial institution)**  
(SEAL)

Signature \_\_\_\_\_

Notarized this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

County of \_\_\_\_\_

State of \_\_\_\_\_

Commission expires \_\_\_\_\_