



# Change Automatic Payments/Withdrawals

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Company That Makes Automatic Withdrawal

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

**To Whom It May Concern:**

You are currently withdrawing \$ \_\_\_\_\_ (amount) for account # \_\_\_\_\_ on the \_\_\_\_\_ day of the month from the following account:

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

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

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

Account Type: \_\_\_\_\_

**Effective \_\_\_\_\_ (date), please stop making withdrawals from the account and debit from:**

Financial Institution Name: Truliant FCU

Routing Number: 253177832

Member-Owner Number: \_\_\_\_\_

If you have any questions about this request, please contact me at \_\_\_\_\_  
Phone Number

Sincerely,

\_\_\_\_\_  
Signature

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

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

Make copies of this form as needed.

