
Company Name

Company Address

City

State

Zip

Company Phone

Please cancel the current auto-payment from _____ (bank or credit union).

Please accept this letter as notification that I have established a new checking and/or savings account at First National Bank. I would like the following payment to be automatically debited from my account per the instructions listed below.

Establish Automatic Payment

Change my existing Automatic Payment

Automatic Payment Information:

Company Name: _____

Company Account #: _____

Payment Amount: \$ _____

Personal Information:

Name: _____

Mailing Address: _____

City: _____

State: _____ Zip: _____

Daytime Phone Number: _____

Bank Account Information:

Account Type:

Checking Savings Money Market

First National Bank Account #: _____

First National Bank Routing Number 091914820

I authorize:

The listed employer/company to change deposits of my funds to my First National Bank checking or savings account.

First National Bank to credit funds to my account(s).

This authorization to remain in effect until I send written notice of change or cancellation.

Signature: _____

Date: _____