

CHANGE AUTOMATIC WITHDRAWAL

____/____/____
Effective Date

Name of Company That Makes Automatic Withdrawals

Address

City

State

Zip

To whom it may concern:

You are currently withdrawing \$ _____ **(amount) for** _____

(what payment is for), **from** _____ (account number),
on _____ (when) **from the following account:**

Financial Institution Name

Routing Number

Account Number

CHECKING SAVINGS

Please stop making withdrawals from that account and instead make them from:

LUSO Federal Credit Union

Financial Institution Name

211883922

Routing Number

Account Number

CHECKING SAVINGS

If you have any questions about this request, please contact me at:

Phone Number

Best Time to Call

Thank you.

Sincerely,

Signature

Name (please print)

Address

City, State, Zip

