

Auto Payment Change Form

Mail one insert to each company that automatically withdraws funds from your checking account. Make copies of this form as needed.

Auto Payment Change Request

Today's Date

Company Name

Company Address

City, State and Zip

Account # _____

You are currently withdrawing \$ _____ for my _____ payment.
(Amount) (What Payment is For)

Please change my automatic monthly payment to the following information and send me confirmation as such:

North East Texas Credit Union

PO Box 1480

Lone Star, TX 75668

Routing #: 311985746

Checking Account #: _____

Signature

Name (Please Print)

Address

City, State and Zip