



Change Automatic Withdrawal

Date _____ Company making withdrawal _____

Street Address _____ Phone # _____

Mailing Address _____

City _____ State _____ Zip Code _____

To Whom It May Concern:

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

(what payment is for), from _____ (account or other identifying number),

on _____ (when) from the following account:

Current Bank:

Current Bank Routing Number:

Current Account Number:

Type of Account (circle one): Checking Savings

Please stop withdrawing payments from the above financial institution and account and instead make them from:

New Bank Name: Farmers State Bank

Routing Number: 092902394

Account Number: _____

Type of Account (circle one): Checking Savings

Bank Address: 103 Main Street/P.O. Box 190 Victor, MT 59875

Victor, MT 59875-0190

If you have any questions regarding this request I can be reached during the Daytime / Evening (circle one) at (phone number) _____. Thank you.

Sincerely,

X _____

Name _____

Address _____

City _____

State _____ Zip _____