

Date: \_\_\_\_\_

Dear: \_\_\_\_\_,

I am writing to inform you of a change regarding my financial institution concerning account number \_\_\_\_\_ that I hold with your establishment.

I currently have my \_\_\_\_\_ payment automatically withdrawn from my checking/savings account number \_\_\_\_\_ held at \_\_\_\_\_ on the \_\_\_\_\_ day of each \_\_\_\_\_. I would like to transfer these monthly transactions to my new financial institution, **CLAY COUNTY STATE BANK**, therefore please accept this letter as my written notification.

I understand I will need to give you at least two weeks notice prior to the next scheduled transaction. I will anticipate the last transaction from \_\_\_\_\_ to be dated \_\_\_\_\_, and the first one from **CLAY COUNTY STATE BANK** to be dated \_\_\_\_\_.

Thank you for your assistance in this matter. Enclosed please find an automatic payment authorization form that includes the information necessary to begin withdrawals from my **CLAY COUNTY STATE BANK** account.

Sincerely,

\_\_\_\_\_

Name

\_\_\_\_\_

Street

\_\_\_\_\_

City, State and ZIP

\_\_\_\_\_

Phone Number

Enclosure – Automatic Payment Authorization Form