



CHANGE AUTOMATIC

Date:

Name of Company That Makes Automatic Withdrawal:

Address:

City, State, Zip:

To Whom it May Concern:

You are currently withdrawing _____ (amount) for my _____ (what payment is for),
_____ (account or other identifying number), _____ (when) from the

following account:

- Old Bank:
- Bank Routing Number:
- Account Number:

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

- Financial Institution Name: HAPO Community Credit Union
- Bank Routing Number: 325181264
- Account Number:

If you have any questions about this request, please contact me during the DAY/EVENING (circle one) at
_____ (phone number)

Thank you.

Signature:

Name (please print):

Address:

City, State, Zip:

509.943.5676

hapo.org

