

Automatic Withdrawal Authorization

Use this form to change an automatic payment, withdrawal or deduction from your account.

You will need to complete a separate form for each transaction or visit the company's website to update your account information.

Name of Company:

Account Number:

Payment Amount:

Address:

City, State, Zip:

Phone Number:

TIP:

You can use your keyboard to complete this form online, or print and complete by hand.

Please **change** my automatic withdrawal from the following account:

Financial Institution:

Account #

Bank Routing #

Please make all **future** automatic withdrawals from the following account:

Financial Institution:

BLC Community Bank

Account #

Bank Routing #

075905868

This authorization shall remain in effect until I have submitted a new authorization, or until this authorization is changed or revoked.

Name:

Address:

City, State, Zip:

Phone Number:

Signature:

Date:

