



# UnionState

www.unionstate.net

Member FDIC

## Automatic Payment Change Form

Date \_\_\_\_\_

Do you make automatic payments from your checking account?

- |                                       |                                       |  |                                      |
|---------------------------------------|---------------------------------------|--|--------------------------------------|
| <input type="checkbox"/> Mortgage     | <input type="checkbox"/> Telephone    | <input type="checkbox"/> Electricity     | <input type="checkbox"/> Internet    |
| <input type="checkbox"/> Cell Phone   | <input type="checkbox"/> Insurance    | <input type="checkbox"/> Loans           | <input type="checkbox"/> Investments |
| <input type="checkbox"/> Credit Cards | <input type="checkbox"/> Health Clubs | <input type="checkbox"/> Social Security | <input type="checkbox"/> Cable       |
| <input type="checkbox"/> Charities    | <input type="checkbox"/> Other        |  |                                      |

Complete the form below, detach and include it in an envelope with a voided check or deposit slip from your Union State Bank account. Mail it to the appropriate companies or organizations you have authorized to make withdrawals from your account. While most companies accept this form, there may be some that require you to complete their own request form.

**Please make additional copies of this form as needed**

<b>AUTOMATIC PAYMENT CHANGE REQUEST</b>															
I have opened a new account at Union State Bank. Please change your records so that my electronic payments to you are deducted from my account.															
To (Payee Name)								Your Name							
Payee Address								Your Address							
Account Number (Insert your account number with payee)															
Union State Bank Routing Number								Union State Bank Account Number							
0	6	2	2	0	3	3	9	5							
Signature										Telephone Number (     )					

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