



Authorization to Change My Automatic Payment

Dear *(name of company)* _____

I am changing banks for the automatic payments made to your company for my account #

_____. You are currently drafting payments from:

Name of old bank _____

Routing # _____

Account # _____

Please stop making withdrawals on the above account on *(insert date)* _____ and begin

drafting payments from my new Marine Bank & Trust account:

Marine Bank & Trust Company

571 Beachland Blvd

Vero Beach, FL 32963

Routing # 067014246

Account # _____

Checking

Savings

This authority will remain in effect until I notify you in writing to cancel, allowing time for the financial institution to act on it.

Name _____

Address _____

Address Cont _____

Phone # _____

Signature _____ Date _____