

CHANGE Automatic Payment/Withdrawal



The Hicksville Bank
"Your Hometown Bank"

Please accept this form as notification that I have established a new account with The Hicksville Bank. Currently you are authorized to withdrawal automatic payments from my existing account, which I am closing and will no longer be valid. I am authorizing you to establish automatic payments from my new account.

Company Information

Date: _____

Name of company that makes the automatic withdrawal: _____

Address: _____

City: _____ State: _____ Zip: _____

Please make the following change

You are currently withdrawinging \$ (amount): _____

from my account on a *weekly* | *monthly* | *annual basis* (circle one)

Previous financial institution: _____

Bank routing number: _____

Financial institution account number: _____

Stop making withdrawals from that account effective (date): _____

instead make them from: The Hicksville Bank, 144 E. High St., Hicksville, OH 43526

The Hicksville Bank **routing number: 041205958** | The Hicksville Bank account number: _____

_____ Checking Account _____ Savings Account

Customer Information

Date: _____

Signature: _____ Name (printed): _____

Address: _____

City: _____ State: _____ Zip: _____

If you have any questions regarding this request, please contact me at this phone number: _____

144 E. High Street, Hicksville, OH 43526
(419) 542-7726 | THB.bank

