



Change my automatic payment

Date _____

Company Name _____

Address _____

City _____ State _____ ZIP _____

You are currently withdrawing \$ _____ from the following account

for _____ on the _____ day of each month.
(Reason)

Bank name _____

Routing number _____ Account number _____

I authorize you to please:

Stop making withdrawals from the above account on: _____
(Date)

Begin making withdrawals from my new account, below, on: _____
(Date)

Sunflower Bank

Routing number 101100621 Account number _____

You may contact me at the following phone number if you have any questions about this request.

Phone _____ Day Evening

Sincerely,

Signature _____

Name (please print) _____

Address _____

City _____ State _____ ZIP _____

Please print and fill out as many forms as needed.
Please attach a copy of a voided check from your new account.