

Step 3

CHANGE AUTOMATIC WITHDRAWALS (DEBITS)



Date: _____

Company/Utility to Receive Payment:

Address: _____

City: _____ State: _____ Zip: _____

To Whom It May Concern:

You are currently withdrawing funds for my (type of payment) _____,
(account or other identifying number) _____, (when) _____
from the following account:

Former Financial Institution: _____

Routing Number: _____

Account Number: _____

Please discontinue withdrawing from the above account and begin withdrawing from the account with the financial institution below:

Michigan Schools and Government Credit Union

Routing Number: 272480173

Checking/Savings Account Number (circle one): _____

If you have questions about this request, please contact me at (_____) _____.

Your prompt attention to this request is appreciated. Thank you.

Sincerely,

Signature: _____ Date: _____

Name (please print): _____

Address: _____

City: _____ State: _____ Zip: _____