

# Switch Kit

## AUTHORIZATION FOR AUTOMATIC PAYMENT CANCELLATION

To: \_\_\_\_\_

From: \_\_\_\_\_

Merchant Account Number: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Date: \_\_\_\_\_

To Whom it May Concern,

I am writing to inform you of a change in my banking relationship for my account listed above. I currently have my payment automatically withdrawn from my Checking/Savings account at

\_\_\_\_\_ on the \_\_\_\_\_ of the month.  
(Old Financial Institution) (Day)

I am submitting this letter as written notification of my intention to CANCEL these monthly transactions to my new financial institution, Magnifi Financial Credit Union. I understand that I need to give you at least two weeks notice prior to the next scheduled transaction. Therefore, I expect the last transaction posted to my old bank account to be the one dated \_\_\_\_\_  
(Date)

Thank you for your prompt attention to this request.

Sincerely,

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Joint Signature: \_\_\_\_\_

Date: \_\_\_\_\_

