



Change Auto Payment

When transferring your withdrawal(s), remember to allow 30 days before your new automatic withdrawal takes effect. After completing this form, mail it to the financial institution(s) or company(ies) currently drafting your account. For example: Utility company, Credit Card company, Mortgage holder, etc.

Company or Financial Institution

Complete Address

City, State, Zip

To Whom It May Concern,

You are currently withdrawing \$_____ (dollar amount) for the payment of my _____ (Auto, Credit Card, Mortgage) on _____ (Date of Withdrawal) from the account listed below:

Financial Institution: _____
Routing/Transit Number: _____
Account Number: _____

Please stop drafting the above account and begin drafting to the account listed below:

New Account Information:
Financial Institution: _____
Routing/Transit Number: _____
Account Number: _____

If you have any questions about this request or require additional documents, please contact me during the DAY/EVENING (circle one) at _____ (phone number).

Thank you for your assistance.

Sincerely,

Name (please print)

Signature

If you have any questions about this or any other forms, please contact us at 410-965-8908 or 1-866-4SECPLUS, or stop by one of our branches.

Address

City, State, Zip

Co-Signer (please print)

Co-Signer Signature

If you have any questions about this or any other forms, please contact us at 410-965-8908 or 1-866-4SECPLUS, or stop by one of our branches.