Northern Communities Credit Union
3311 West Arrowhead Road, Duluth, MN 55811
5322 Grand Avenue, Duluth, MN 55807
800 16th Avenue South, Virginia, MN 55792
218-279-3200 / 1-877-419-3200
www.nccyou.com

Authorization For Canceling Automatic Payment

(insert date)

Dear: (vendor name)

I am writing to inform you of a change in my banking relationship concerning my account numbered

Account number (account number) .

I currently have my payment automatically withdrawn from my checking/savings account numbered

Account number (checking / savings acct number) at (bank or credit union name)

on the (date) of each month.

I would like to transfer these monthly transactions and submit this letter as written notification of that intention.

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 to be the one dated (date of final transaction)

Thank you for your prompt attention to this request.

Signature _____ Date (date)

Second signature (if joint account) _____

Name (name)

Address (address)

City (city) State (state) Zip (zip code)

Phone number (phone number)