CHANGE AUTOMATIC WITHDRAWAL

				_ / /_ etive Date	<u></u>
Name of Company That Makes Automatic Withdrawals					
Address					
City		 State			
City		State	Zip		
To whom it may concern:					
You are currently withdrawing \$(a					-
from (account number), OI	n	(when) fr o	om the follo	owing acc	ount:
Financial Institution Name					
Routing Number	Account Number		☐ Checking	☐ Savings	(check one)
Please stop making withdrawals from that accou	nt and instead make them fro	m:			
Veritex Community Bank					
Financial Institution Name					
113024164					
Routing Number	Account Number		☐ Checking	■ Savings	(check one)
If you have any questions about this request, plea	ase contact me at:				
Phone Number	Best Time to Call				
Thank you,					
Signature	Name (please print)				
Address	 City		 State	Zip	