

New Carlisle Federal Savings Bank
Switch Kit
Authorization to Change Your Automatic Payment

Complete this form for each company or organization with whom you have arranged for *Automatic Payment*. Call New Carlisle Federal at any of our offices: **Main Office** – 937-845-3636, **Springfield Office** – 937-342-1999, or **Tipp City Office** – 937-667-7667 for additional forms, or make copies of this form.

I hereby authorize automatic payment from my new _____ checking or _____ savings account at New Carlisle Federal Savings Bank.

Company Name

Company Address

My/our Account Number at This Company

New Bank ABA Routing Number: 242272463

My New Account Number

My/Our Signature(s)

Daytime Phone Number

Date

I have closed my _____ checking or _____ savings account at:

Please Print Name of Financial Institution

Effective Date of the Account Closing

Old Account Number

Name(s) on Account