

Automatic Deductions

Inform companies to have payments automatically deducted from your new **COGTÆCP'DCPM('VTWUV'** account. (i.e. mortgage payments, insurance premiums, gym memberships, etc.)

Helpful Hints!

Track Your Request. To confirm that your automatic deduction is being withdrawn from your **COGTÆCP'DCPM('VTWUV'** account, check your **COGTÆCP'BANK & TRUST** statement, sign up and log onto your online account at co.gtlecpdcpmtwv.gov or call 605-224-9233.

Follow Up. Automatic deductions should take effect within two withdrawal periods. Keep your old account open until all automatic deductions have been switched to your new **COGTÆCP'DCPM('VTWUV'** account. If you don't see the withdrawal by this time, please contact the company.

Reminder. Note that some companies or organizations may require a special form. Contact the company or income source to make sure no other forms are required.

For Multiple Deductions. If you have more than one automatic deduction, please print additional forms as needed.

Follow these easy steps:

1. Complete, sign and date this form.
2. Attach a voided check from your new **COGTÆCP'DCPM('VTWUV'** account.
3. Submit this form to each company that is currently authorized to make automatic deductions from your account.

Company Name: _____

Company Address: _____

To Whom It May Concern:

I recently changed banks and request that my automatic deduction be switched to my new account at **COGTÆCP'DCPM('VTWUV'**. My information is as follows:

Name on account: _____

Identifying number with your company: _____

Address: _____

Phone Number: _____

Please switch my automatic deductions to this account: Checking Savings

COGTÆCP'DCPM('VTWUV'Account Number: _____

COGTÆCP'DCPM('VTWUV'ABA Routing Number: **091409397**

Effective: Immediately
 On _____ / _____ / _____

Address: PO Box 68;
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I authorize your company to initiate debit entries from my account at **COGTÆCP'DCPM('VTWUV'**. I understand that this authorization will remain in full force and effect until all parties have received written notification from me of its termination in such time as to afford a reasonable time to act. If you have any questions, please call me at the number listed above.

Signature: _____ **Date:** _____ / _____ / _____