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Authorization to Change My Automatic Payment

I opened a checking account at First	Farmers State Ba	nk on/ Please re	direct my automation
payment \$ to be withdraw	n from my new ch	necking account #	, effective
/ Enclosed is a v	oided check from	my new account to verify the accou	ınt information.
Primary Account Owner		Soc. Sec. #	
Secondary Account Owner		Soc. Sec. #	
Primary Signature	Date	Secondary Signature	Date
Thank you for your assistance			