



Automatic Payment Transfer Form

This form notifies merchants that you wish to have your automatic payment transaction redirected to BankFinancial. Use one form for each merchant.

To:

Name of company making withdrawal from your account

Address

City State Zip

To Whom It May Concern:

Currently, you are debiting \$ _____ for _____ from
Payment amount Company account number

Old Bank: _____ Routing Transit Number: _____

Account Number: _____

For: _____ On: _____
Payment or Reason Date of Payment

Please discontinue debiting the above account and begin making these automatic withdrawals from:

BankFinancial, F.S.B.

Routing Transit Number: 271972899

Account # _____

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 from my old Bank to be dated _____ and the first one from *BankFinancial* to be dated _____.

This letter is written authorization to make the requested changes. If you have any questions regarding this request, please contact me at the number listed below.

Sincerely,

Customer Signature Date

Customer Name

Customer Address, City, State and Zip

Daytime Telephone Number

To ensure accuracy, staple a voided check from your new *BankFinancial* account below.



Staple voided check here.