

Automatic Payment Authorization Form

Please use this form to notify a company of your request to redirect your automatic payment to your new ACNB Bank account. Complete one form for each automatic payment to be changed.



To:

Company Name

Company Address

Account Number

City, State and Zip

I have opened a new account at ACNB Bank. Effective immediately, please redirect my automatic payment so that it's deducted from my new account. The new bank account information is noted below:

Bank Routing/Transit Number: 031309945 New Account Number: _____

I have also attached a voided deposit slip for your information. Should you have any questions regarding this matter, please contact me at the phone number below. If you are unable to accept this form, please mail your authorized form to me at the address below. Thank you for your immediate attention to this matter.

Name

Address

City, State and Zip

Telephone Number

Signature

Date

Attach voided deposit slip here.