ACH CHANGE FORM

Change information for automatic payments to be debited from your PlainsCapital Bank account

To Whom It May Concern:
I would like to establish an automatic payment as instructed below.

Please: ☐ Create a New Automatic Payment ☐ Change My Current Automatic Payment

Personal Information

Last Name _____ First Name _____ Middle Name _____

Street Address _____ City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Payment Information

Name of Payee _____ Account Number of Payee _____

☐ Debit My PlainsCapital Bank Account

Routing Number: 111322994

Account Number: _____

Note: Attach a voided check or deposit slip below.

☐ Charge My PlainsCapital Bank Debit Card

Card Number: _____

Expiration Date: _____

Authorization

I authorize _____ (payee) to initiate payments from my PlainsCapital Bank account as indicated above and to make adjustments for any debit made in error if necessary. This authority will remain in effect until I have given written notice to terminate this service.

Signature _____ Date _____

FOR ACCOUNT DEBIT,
ATTACH VOIDED CHECK OR DEPOSIT SLIP HERE

When you receive your new checks from PlainsCapital Bank, attach a preprinted voided check or preprinted deposit slip from your new PlainsCapital account to this form before submitting it to the payee for processing.

EQUAL HOUSING LENDER

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