

Authorization To **Stop** Automatic Payment

Return this form to: City of Midwest City **ATTN: Customer Service, 100 N. Midwest Blvd MWC, OK 73110**

For additional Information call (405)739-1252 or 739-1254

NAME:

(As it appears on your bill -- PLEASE PRINT)

SERVICE ADDRESS:

CITY:

STATE:

ZIP:

PHONE:

CUSTOMER ACCOUNT NUMBER:

FINANCIAL INSTITUTION:

CITY:

STATE:

ZIP:

CHECKING ACCOUNT OR

SAVINGS ACCOUNT?

(Circle One)

ROUTING NUMBER:

BANK ACCOUNT NUMBER:

IMPORTANT: Please allow 30 days to stop bank draft.

I request you to **STOP** making automatic withdrawals from my checking/savings account for my monthly utility bill.



Your Signature

Date