FIRST NORTHERN
BANK & TRUST

Automatic Payment Change Form

Give this to Company/Payee

Due to a recent change in my/our banking relationship I/we authorize the change of the preauthorized automatic payment(s) from my old checking/savings account to the new checking/savings account held at First Northern Bank & Trust. The following is the necessary information to complete this request.

Below is in reference to the account that I hold with your company:

Company Name _____

Account Number _____

Account Owner(s) _____

Account Owner Address _____

City _____ State _____ Zip _____

Daytime Phone Number _____

I authorize any future automatic payments to be debited from my new account at First Northern Bank & Trust.

First Northern Bank & Trust Routing/ABA Number: 031312929

New Account Number: _____

- ☐ Savings
- ☐ Checking

Please discontinue making payments from my/our previous account:

Previous Financial Institution _____

Please send a written confirmation of this change, along with effective date, to the address listed above.

Authorized Signature(s) _____ Date _____

** Please note that you are responsible for the accuracy of the information you provided to your affected contacts. First Northern Bank & Trust has no control over the amount of time it will take your contact to process your request so you should plan interim payments accordingly.

Member FDIC