

ANTIGO WATER & SEWER UTILITY
700 EDISON ST
ANTIGO, WI 54409

ACH BANK PAYMENT CANCELLATION

NAME _____ ACCT NO. _____

SERVICE ADDRESS _____ Discontinue ACH
Change Bank Acct

As of _____, I wish to discontinue/change the automatic bank payment for my
(Date)

Water & Sewer utility bills from _____, bank account
(Name of Bank)

number _____
(Between : and || • on bottom of check)

Signature

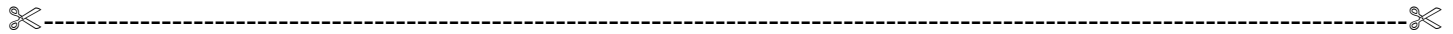
FOR OFFICE USE ONLY:

DISCONTINUE ACH

- Process immediately (acct clear)
- Process immediately (*before* bill due _____)
- Process after bill due on _____

CHANGE BANK ACCT

- Process immediately (acct clear)
- Process immediately (*before* bill due _____)
- Process after bill due on _____



ANTIGO WATER & SEWER UTILITY
700 EDISON ST
ANTIGO, WI 54409

ACH BANK PAYMENT CANCELLATION

NAME _____ ACCT NO. _____

SERVICE ADDRESS _____ Discontinue ACH
Change Bank Acct

As of _____, I wish to discontinue/change the automatic bank payment for my
(Date)

Water & Sewer utility bills from _____, bank account
(Name of Bank)

number _____
(Between : and || • on bottom of check)

Signature

FOR OFFICE USE ONLY:

DISCONTINUE ACH

- Process immediately (acct clear)
- Process immediately (*before* bill due _____)
- Process after bill due on _____

CHANGE BANK ACCT

- Process immediately (acct clear)
- Process immediately (*before* bill due _____)
- Process after bill due on _____