Automatic Payment Request

Use this form to request a transfer of an automatic payment to your Commercial National Bank account, or to establish a new automatic payment from your Commercial National Bank account. Complete this form for each automatic payment, and attach a voided check from your new Commercial National Bank account. Please allow sufficient time for your first automatic payments to be activated against your new Commercial National Bank account.

To (Company Name):		
	ant to my new account with	nd will need to have my automatic withdrawal Commercial National Bank. The automatic
Account Number with Compan	y:	Debit Amount:
**Effective immediately with Commercial Nation		atic debit my account
Account #:	ABA Routing #: _	
If you have any questions, pl	ease call me at the number l	isted below.
Primary Account Owner:		
Address:		
City, State, Zip:		
Telephone:		
Primary Account Owne	r Signature:	
Date:		