

CITY OF LOBELVILLE

P.O. Box 369
Lobelville, TN 37097

Robby J. Moore, Mayor
Cristal Odom, City Recorder

Phone: (931)-593-2285
Fax: (931)-593-2279

Cancellation of Automatic Debit Letter

Date:

To Whom It May Concern:

I currently have my payment for account number(s)_____ automatically withdrawn from my ☐ Checking ☐ Savings account #_____. Effective immediately, I would like to cancel this automatic debit and submit this letter as written notification of my termination of your utility company's authorization to debit my account.

I expect that your last automatic withdrawal from my account will be for the payment due _____.

Thank you for your prompt attention to this request.

Sincerely,

Signature

Print Name