



## Change Your Automatic Deposits & Withdrawals

Use the following worksheet to help you keep track of the companies and/or individuals you need to notify to change your account information for any automatic deposits and withdrawals you currently have set-up to credit or debit your old account(s).

### Direct Deposits

Primary Account Owner						
	Company Name	Address	ID / Account No.	Amount	Frequency	Date of Next Deposit
Employer						
Social Security Administration						
Pension Administrator						
IRA/401K Distributions						
IRA/401K Distributions						
Other Retirement/Investment						
Other Retirement/Investment						
Other: _____						
Other: _____						
Other: _____						
Other: _____						

Joint Account Owner						
	Company Name	Address	ID / Account No.	Amount	Frequency	Date of Next Deposit
Employer						
Social Security Administration						
Pension Administrator						
IRA/401K Distributions						
IRA/401K Distributions						
Other Retirement/Investment						
Other Retirement/Investment						
Other: _____						
Other: _____						
Other: _____						
Other: _____						

## Automatic Withdrawals & Payments

	Company Name	Address	ID / Account No.	Amount	Frequency	Date of Next Withdrawal
<b>Loans</b>						
Mortgage Loan						
Auto Loan						
Loan: _____						
Loan: _____						

<b>Credit Card Providers</b>						
Credit Card: _____						
Credit Card: _____						
Credit Card: _____						
Credit Card: _____						

<b>Insurance Providers</b>						
Home Insurance						
Auto						
Life						

<b>Utility Companies</b>						
Electric/Gas Utility						
Telephone Company						
Cellular Phone Provider						
Cable / Satellite TV Provider						
Internet Provider						
Water Service Provider						
Garbage Collection						
Newspaper						
Other: _____						

<b>Savings &amp; Investment Contributions</b>						
Savings Account						
IRA						
Investment						
Other: _____						

<b>Other Automatic Withdrawals &amp; Payments</b>						
Daycare Provider						
Fitness Membership						
Other Membership Dues						
Charitable Contributions						
Medial Expenses						
Other: _____						
Other: _____						
Other: _____						