



TRI-COUNTY RURAL WATER DIST. NO. 2
Pottawatomie County, Oklahoma

**REQUEST TO TERMINATE ACH DIRECT PAYMENT
WITHDRAWAL**

NAME: _____

ADDRESS: _____

SERVICE ADDRESS (if different from above)

PHONE: _____

FINANCIAL INSTITUTION INFORMATION

NAME OF BANK: _____

BANK ADDRESS: _____

BANK PHONE: _____

I hereby request Tri-County RWD #2 to terminate automatic electronic debits from my checking/savings account.

Signature: _____

Date: _____