



REQUEST FOR REMOVAL FROM BANK DRAFT PROGRAM

DATE: \_\_\_\_\_

I, \_\_\_\_\_, request that my account , # \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_,  
Customer Name Customer Account Number  
be removed from CHELCO's Bank Draft program.

\_\_\_\_\_  
Customer Signature

ADDITIONAL NOTES: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Received By: _____ <small>Member Accounts Clerk Signature</small>
Date Received: _____
Verified By: _____ <small>Member Credit Clerk Initials</small>
<b>Attribute removed</b> <b>FAX:850-892-9435</b>