



CHECKING ACCOUNT CHANGE

Date: _____
To: Card One International
From (Authorized Signer): _____
Company Name: _____
Merchant ID Number: _____
Telephone: _____
Fax: _____

Please change our checking account as indicated below:

From

Previous Bank: _____
Previous Bank Address: _____
Previous Transit / Routing Number: _____
Previous Checking Account Number: _____
Previous Bank Phone Number: _____ Previous Bank Fax Number: _____

To

New Bank: _____
New Bank Address: _____
New Transit / Routing Number: _____
New Checking Account Number: _____
New Bank Phone Number: _____ New Bank Fax Number: _____

Authorized Signature: _____ Print Name: _____ Date: _____

ATTACH VOIDED CHECK OF NEW ACCOUNT HERE

Instructions: Complete form, attach voided check of new account, and fax to (310) 826-5100

Note: First change – no fee. Additional requests - \$15 per each change.