

Direct Payment Change Notice for Check Card Deductions (form #2B)

Instructions: Complete this form and send to company receiving payments directly using your check card.

Check card number _____

Personal Information

Name _____

Social Security Number _____

Name of Vendor or Company Receiving Payment _____

Address _____

Previous Card Information

Check card number _____

New Card Information

Check card number _____

Expiration Date _____

Authorization

I hereby authorize this change in direct payment effective as soon as possible.

Signature _____

Date _____

Questions may be directed to National Penn Bank's Information Center at 1.800.822.3321 or submit your question through our Contact Us form at <https://services.nationalpenn.com/securemail/npb/contactus.asp>



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