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Phone 317.636.1062 Fax 317.636.1186

AUTHORIZATION FOR TERMINATION OF AUTOMATIC DEBIT ORIGINATION

I (we) hereby authorize the Chapter 13 Trustee, hereinafter called TRUSTEE, to terminate debit entries from my (our) checking account indicated below, and the depository named below, herein called DEPOSITORY, to terminate debit entries from the same such account.

Bank Name:		
Transit/ABA (Bank Routing) No.:		
Account No.:		
Name:	Case No:	
Signed:	Date:	
Your phone number:		