



## **AUTOMATIC WITHRDRAWAL CHECKLIST**

	Mortgage/Rent		Auto Insurance		Movie Subscription	
	Electric Company		Home Insurance		Credit Card:	
	Water Company		Health Insurance		Credit Card:	
	Gas Company		Gym Membership		Credit Card:	
	Cable Service		Student Loan		Other:	
	Internet Service		Vehicle Loan		Other:	
	Cell Phone		Music Subscription		Other:	
	the above payees to I	BillPay within	your Online Banking	g, be sure to h	ave the following	
Payee C	Company Name:					
Address:			State	: Zip:		
Accoun	t Number:					
Payment Amount:Frequency/Payment Date:						
Payee C	Company Name:					
Address:			State	: Zip:		
Accoun	t Number:					
Payment Amount:F			Frequency/Paym	nent Date:		
Payee C	Company Name:					
Address	s:			State	: Zip:	
Accoun	t Number:					
Payment Amount:Frequency/Payı			nent Date:			
Payee C	Company Name:					
Address	s:			State	: Zip:	
Accoun	t Number:					
Payment Amount:			Frequency/Payment Date:			