

[Your Name]  
[Your Address]  
[City, State, Zip Code]  
[Your Phone Number]  
[Your Email]

[Date]

[Bank Name]  
[Bank Address]  
[City, State, Zip Code]

**RE: Formal Notice to Stop Direct Debit Payment**

To the Customer Service Department,

I am writing to formally request that you stop all future automatic direct debit payments to the following company from my account:

- **Account Holder Name:** [Your Name]
- **Account Number:** [Your Account Number]
- **Merchant/Company Name:** [Name of Company Charging You]
- **Amount of Payment:** [Amount]
- **Frequency:** [Monthly/Weekly/One-time]
- **Effective Date:** [Date of Stop Request]

I have already notified [Company Name] to cancel this authorization. Please ensure that no further funds are withdrawn by this entity from my account effective immediately. I understand that there may be a fee associated with this stop payment request as per the terms of my account agreement.

Please provide written confirmation once this stop payment order has been processed.

Thank you for your prompt attention to this matter.

Sincerely,

[Your Signature]

[Your Printed Name]