[Your Name/Company Name]
[Your Address]
[City, State, Zip Code]
[Phone Number]
[Date]

[Recipient Name/Financial Institution]
[Department Name]
[Address]
[City, State, Zip Code]

Subject: Mutual Consent to Terminate Electronic Funds Transfer (EFT) Authorization

Dear [Name of Recipient],

This letter serves as formal notification and mutual agreement between [Your Name/Company Name] and [Recipient Name/Company Name] to terminate the existing Electronic Funds Transfer (EFT) authorization effective as of [Termination Date].

The details of the account currently linked for these transfers are as follows:

- **Account Holder Name:** [Name on Account]
- **Bank Name:** [Name of Financial Institution]
- **Account Number (Last 4 digits):** [XXXX]
- **Routing Number:** [Routing Number]

Both parties agree that after the effective date mentioned above, no further automated debits or credits shall be processed using these banking details. Any outstanding payments or future obligations will be settled via [Alternative Payment Method, e.g., Check, Wire Transfer].

Please acknowledge receipt of this letter and confirm in writing that the EFT authorization has been successfully deactivated in your system.

Sincerely,

_____
[Your Signature]
[Your Printed Name/Title]

Mutual Agreement Acknowledgment:

_____
[Recipient Signature]
[Recipient Printed Name/Title]
[Date]