

The Manager
Mute Swan Capital
Abuja



Dear Sir/Madam,

Cancellation of ACH Direct Debit

Client Name : _____

MS Account Number : _____

Type of fund: : _____

Bank Account Name : _____

Name of Bank : _____

Bank Account Number : _____

Bank Branch : _____

Cancellation Amount : _____

Next Due Date : _____ / _____ / _____ (dd / mm / yyyy)

Client's Signature : _____ Phone Number : _____ Date : _____

Please cancel the Direct Debit Instruction detailed above effective immediately / effective : _____ / _____ / _____ (dd / mm / yyyy)

Reviewed by : _____ Signature : _____ Date : _____