



**Office of Treasurer**  
**Smart Pay Cancellation Form**

Deborah B. Robinson  
P. O. Box 251  
Yorktown VA 23690-0251  
Fax (757) 890-3439

Name \_\_\_\_\_  
Service Address \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
Customer Account # : \_\_\_\_\_

I would like to withdraw from the Smart Pay program.

Stop debiting my  Checking account to pay my utility bill.  
 Savings

Signature \_\_\_\_\_ Current Date \_\_\_\_\_  
Date Effective \_\_\_\_\_