

DIRECT DEPOSIT ENROLLMENT/CHANGE REQUEST

Step 1: Copy | Step 2: Fill In | Step 3: Send

Company Information

Company Name

Company Street Address

City, State

Zip

To Whom It May Concern:

I have recently opened an account with Bank of Advance and would like to authorize all transactions be deposited into my new account. Please use the following information to discontinue any deposits into my old account (if applicable) and begin depositing to my new Bank of Advance account.

Direct Deposit Information

New Direct Deposit (Enrollment)

Existing Direct Deposit (Change Request)

Deposit Type

Paycheck

Social Security check

Retirement check

CD Interest check

or other _____

Previous Financial Institution Information

Previous Financial Institution Name

Previous Financial Institution Routing Number

Previous Financial Institution Account Number

New Bank of Advance Account Information

Please direct all deposits to the following Bank of Advance account:

Bank of Advance Routing Number

081506523

Bank of Advance Account Number

Effective Date

I have attached a deposit slip to verify the new account information.

Acknowledgement

Thank you for your prompt attention to this matter. If you have any questions about this request, please contact me as soon as possible.

Employee ID (if required)

Phone Number

Date

Street Address

City, State

Zip

Printed Name

Signature

NOTE: If you already receive Social Security or SSI benefits via Direct Deposit, call 1-800-772-1213 to complete your change request. The Social Security Office is required to talk to the deposit recipient directly.