



Direct Deposit / Payroll Change

_____ (Date)

Entity making direct deposit on your behalf (i.e. Employer or pension administrator)

Address

City

State

Zip

To Whom It May Concern:

Currently, you are depositing a recurring payment into the following account:

Bank Name _____

Routing Number _____

Account Number _____

I authorize you to start making these automatic deposits into my account at Shore United Bank.

Bank Name **Shore United Bank**

Routing Number **052100932**

Account Number _____

- Checking
 Savings

Please send me confirmation indicating when this change in my deposit will be effective. My contact information is below.

Sincerely,

Your Signature

Print Name

Street Address

City, State, Zip

Phone Number