

Direct Deposit Change Form

Employer/Depositor

Employer/Depositor Address

City, State, Zip Code

RE: Switching My Direct Deposit

To whom it may concern: I recently switched financial institutions and am requesting that my direct deposit be changed to my new First State Bank account. Please begin making direct deposits into my new account and stop depositing into my old account listed below.

Thank you for your timely assistance in this matter. If you have any questions concerning this request, please contact me by phone at the number listed below.

Sincerely,

Authorized Signature (Original signature required)

Date

Direct Deposit Information

Name

Phone: Day

Phone: Evening

Address

City, State, Zip Code

Old Financial Institution Name

Old Routing Number

Old Account Number

Amount of Deposit

Date of Deposit

First State Bank

New Financial Institution Name

New Routing Number

New Account Number

Attach a voided check or deposit slip from your new First State Bank account.



www.firststatebanks.com

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