

Authorization to Change
Direct Deposit

Complete a separate form for each direct deposit. You may photocopy this form.

Name of Direct Depositor

Direct Depositor Phone Number

Direct Depositor Address

I plan to close my checking account at (Name of bank)

Account Number

Account holder

Social Security Number

I authorize direct deposit to my new checking account at Superior Bank, effective immediately.

My new checking account number is

The new routing/ transfer number is

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

Signature

Date

Daytime phone

