

Automatic Deposit Authorization Form

Type of Automatic Deposit: Employee Payroll Pension/Retirement Social Security
 Investment Income Other (please specify)_____

Date _____

To (Company) _____

Address _____

City, State, Zip _____

I have recently changed banks and will need to have my automatic deposits switched from my old account to my new account with The Commercial Bank. Following is personal information you may need to aid in this process.

Name _____

Address _____

I currently have my automatic deposit going to:

Financial Institution _____

Account # _____

Banking Routing # _____

Please change this to my new account with The Commercial Bank as soon as possible:

Account # _____

Bank Routing # 061110654 _____

Bank Phone # 706-743-8184 _____

If additional information is needed in order to complete this change, please contact me at _____.

Thank you for your assistance in this manner.

Sincerely,

I hereby authorize the change to my account:

Signature of Account Holder Date

Signature of Account Holder Date

Attached: Voided check from my new The Commercial Bank Account