

Switch Kit

DIRECT DEPOSIT / PAYROLL CHANGE

Date: _____

To: _____ (Company Name)
_____ (Address of Company)
_____ (City, State, Zip)

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

To Whom It May Concern:

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

Bank Name: _____
Routing Number: _____
Account Number: _____

Effective immediately, I hereby authorize you to start making these automatic deposits into the following 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

(Name) _____
(Street Address) _____
(City, State, Zip) _____
(Phone Number) _____
 Day Evening