

DIRECT DEPOSIT CHANGE FORM

Date: _____

To Company or Agency making direct deposit:

Name: _____

Address: _____

Address: _____

To whom it may concern:

I have changed financial institutions. You are currently depositing funds into the following account:

Previous Bank: _____

Routing Number: _____

Account Number: _____

Please begin making these automatic deposits into my new account at Union State Bank

Effective: _____

Union State Bank

P.O. Box 870

West Salem, WI 54669

Routing Number: 091803818

Account Number: _____

Amount of Direct Deposit: _____

Title on Account: _____

Signature

Address