DIRECT DEPOSIT – Sign Up Form

Complete this form to request direct deposit to your Security State Bank account.

3 EASY STEPS!

- 1. Complete this form.
- 2. Attach a voided check to this form for confirmation of numbers.
- 3. Submit this information to the appropriate place. For **Payroll Deposits:** Submit this form to your employer's payroll department.

| Personal Information | n: | | |
|---|---|---|---|
| | | | |
| First Name | Middle Initial | Last Name | |
| Social Security or Tax F | ayer ID Number | | |
| Address | | | |
| City | State | Zip Code | |
| Phone Number | | Alternate Phone Number | |
| | | | |
| Type of Deposit: | | | |
| Payroll Other: | Retirement/Anr | nuityDividend (non SSA/SSI*) | |
| | lirect deposit of Social Secur your local Social Security Of | rity to your Security State Bank account, please call | I |
| | | | |
| Account you would | like your check automat | tically deposited into: | |
| Security State Bank Acc | count Number: Savings | | |
| Security State Bank Ro | uting Number: 125100607 | 7 | |
| Name on the Account:_ | | | |
| I authorize (name of company) and Security State Bank to automatically deposit my check into my account listed above. This authorization will remain in effect until I have filed a new authorization, or until this authorization is revoked by me in writing. | | | |
| Customer Signature | | Date | |