

Direct Deposit Change Request

Complete a separate form for each payment.

Change New

Company Information

Name Date

Address

City, State, Zip Phone

Individual Information

Name Date

Address

City, State, Zip Phone

I have closed account _____ at _____, and

hereby authorize the transfer of my direct deposit to my new bank, Coastal States Bank, and submit this letter as written notification.

Deposit Instructions

Financial Institution: Coastal States Bank (CSB)

Routing Number: 053208105

Deposit the entire amount into account number _____.

Deposit \$_____ into account number _____ and the remainder into account number _____.

I authorize:

- The above listed entity to initiate deposit of my funds to my CSB account(s)
- CSB to credit entries to my account
- The notice to remain in effect until I send written notice of change or cancellation

Signature Date

Printed Name

*Attach a voided check copy

