

DIRECT DEPOSIT ENROLLMENT

How to sign up for direct deposit.

Ask your employer if they have a direct deposit form. If so, fill out their form for a new direct deposit request or a change request. If your employer does not have a standard form, fill out this form. **Provide this form to your employer or the originator of your direct deposit.**

You may also be able to use this form for any non-governmental organization, but check with your employer first. In addition, you can use this form to have dividend or insurance proceeds directly deposited into your account.

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	New Requ	uest Change Request
First Name:		Last Name:
Full Address:		
Last 4 digits of your Social Security Number:		
I hereby authorize (company/organization) , hereinafter called "Originator		
to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit error to my account(s) indicated below and the depository institution named below, hereinafter called "Depository", to credit and/or debit the same to such account.		
PRIMARY ACCOUNT		
Depository No St. Mary's Bank		Account Type: Checking Savings
	anchester, NH 03105	Account Number:
Routing Numb	Der: 011400149	Amount to Deposit: Net Pay \$ Fixed Amount
If the Originator allows direct deposit to more than one account, I elect to have part of my proceeds put into the following account:		
SECONDARY ACCOUNT (OPTIONAL)		
Depository Na St. Mary's Bank P.O. Box 990, Mo 1.888.786.2791		Account Type: Checking Savings
	anchester, NH 03105	Account Number:
	Der: 011400149	Amount to Deposit: Net Pay \$ Fixed Amount
This authority is to remain in full force and effect until Originator has received written notification from me of its termination in such time and in such manner as to afford Originator and Depository a reasonable opportunity to act on it.		
Signature:		Date: