



UNIVERSAL DIRECT DEPOSIT FORM

To whom it may concern:					
Please 🔲 initiate 🔲 change my direct deposit as indicated below:					
First Name			Last Name		
Address			City		
State			Zip		
State					
Social Security Number			Primary Phone Number		
	PRIMARY ACCOUNT	Ī		SECONDARY ACCOUNT	
Bank Name:	First Convenience Bank		Bank Name:	First Convenience Bank	
Routing Number:	122106455		Routing Number:	122106455	
Account Number:			Account Number:		
Account Type:	☐ Checking ☐ Savings		Account Type:	☐ Checking ☐ Savings	
Deposit Amount:	☐ Net Pay ☐ \$(fixed amount)		Deposit Amount:	Net Pay \$(fixed amount)	
By signing below, I authorized to initiate/change my direct deposit:					
Signature Date					
Signature of Bank Representative		D	ate	Branch Phone Number	
ATTACH VOIDED CHECK					
ATTACH VOIDED CHECK					
IF REQUIRED					

We'll pay YOU \$9.99 for your DIRECT DEPOSIT. See a personal banker for details!*

*To receive the one-time payment of \$9.99, contact your personal banker after your new monthly (recurring) electronic direct deposit has posted to your account. Offer subject to change without notice.



