



Change Payroll Direct Deposit Form

Send this form to employers, government offices or financial institutions that make direct deposits (payroll, Social Security, CD interest payments, etc.) into your account.

Date: _____

Employer/Depositor Name: _____

Employer/Depositor Address: _____

Employer/Depositor City, State, Zip: _____

You are currently depositing my entire paycheck part of my paycheck into the following account:

Financial Institution: _____

Routing Number: _____

Account Number: _____

Please stop making deposits to that account and instead send them to:

AnchorBank, PO Box 7933, 25 W. Main St., Madison, WI 53703

Routing Number: 275971087

Account Number (10 digits): _____

Effective Date: _____

If you have questions about this request, please call me at: _____

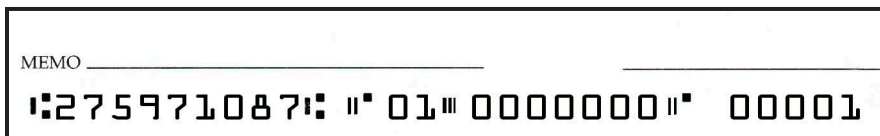
During the day In the evening

Name (please print): _____

Address: _____

City, State, Zip: _____

Signature: _____



This is a sample of an AnchorBank check.

↑ Routing # (9 digits) ↑

↑ Account # (10 digits) ↑

↑ Check # ↑