

DIRECT DEPOSIT AUTHORIZATION FORM

Use this form to switch your direct deposit to your First Federal Savings of Middletown checking or savings account.

COMPANY NAME	
ADDRESS	
I hereby authorize my employer to re-	direct my deposit into the account listed below:
BANK: First Federal Savings of Midd	dletown ROUTING NUMBER: 221972098
CHECKING ACCOUNT #	
SAVINGS ACCOUNT #	
Complete the information below and form to your employer.	if applicable, attach a voided check and then submit this signed
NAME ON ACCOUNT	
ADDRESS	
CITY, STATE, ZIP	
TELEPHONE	EMAIL
SIGNATURE	DATE

22 James Street, PO Box 2023, Middletown, NY 10940 Tel: 845-343-1401 Fax: 845-343-1618 www.ffsmid.com

Member FDIC – Equal Housing Lender

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