PLEASE CHANGE MY DIRECT DEPOSIT ACCOUNT

Use this form to request direct deposits (payroll, retirement or insurance checks) to your Sullivan Bank account. You will need to provide this information to your Human Resources/Payroll Processing Department, social security or other income source and authorization they might need to initiate the deposit.

(Please Print)		
Company Name		
Company ID Number		
Effective	, please st	op processing my direct deposit
with		
	(Previous	Bank)
ffective, please start		art using my/our new Sullivan Bank account for
processing my payroll direct deposi Sullivan Bank P.O. Box 489 · Sullivan, MO of Routing Number 08190530	53080-0489 · (800) 6	p45-3191
Type of Account (check one)	□ Checking	☐ Savings
Account #		
Signature (Account Owner)		Date
Name (Print)		Daytime Phone
Employee ID Number (If Applicable	s)	