



Member FDIC

Automatic Deposit Authorization Form

To: _____

Date: _____

Type of Automatic Deposit

Employee Payroll
 Social Security
 Other, Please Specify _____

Investment Income
 Retirement/Pension

This letter serves as authorization for you to change the customer account information for automatic Deposits for account number _____ in the names of:

I/we have changed accounts to Williamstown Bank, effective as of the date of this correspondence, our new account information is:

Account Number: _____

Bank Routing Number: **051503909**

Thank you,

I hereby authorize the changes noted above to my account.

Account Holder Signature

Date

Telephone

Account Co-Holder Signature (if jointly owned)

Date

Telephone