

# ORRSTOWN BANK



## AUTOMATIC DEPOSIT AUTHORIZATION FORM

To: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_

**Type of Automatic Deposit:**

Employee Payroll     Investment Income  
 Social Security     Retirement/Pension  
 Other, Please Specify \_\_\_\_\_

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 Orrstown Bank. Effective as of the date of this correspondence, our new account information is:

Account Number: \_\_\_\_\_

Bank Routing Number: **0313 1503 6**

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

Orrstown Bank - [www.orrstown.com](http://www.orrstown.com)  
1.888.677.7869

