
Company Name

Address

City State Zip

 **DIRECT DEPOSIT REQUEST**

**RE: Switching My Direct Deposit to a New Account
Attention: Payroll**

I have recently changed banks and would like to update my direct deposit. Please discontinue my current deposit and begin making direct deposit(s) into my new **AVAILA BANK** account.

If you have any questions regarding this request, please contact me by mail or call me at the phone number listed below. Thank you for your prompt assistance in this matter.


Sincerely,

Authorized Signature

Date

DIRECT DEPOSIT INFORMATION

NAME		SOCIAL SECURITY NUMBER	EMPLOYEE NUMBER	
ADDRESS		CITY	STATE	ZIP
PHONE <input type="radio"/> DAY PHONE <input type="radio"/> EVENING PHONE				
PREVIOUS BANK NAME		ROUTING NUMBER	ACCOUNT NUMBER	
AVAILA BANK		073902546		
NEW BANK NAME		NEW ROUTING NUMBER	NEW ACCOUNT NUMBER	

 If you receive a Social Security or government check, the easiest way to enroll in direct deposit or switch a direct deposit is to call the number below:

- For Social Security/SSI Checks: 1-800-772-1213
- For Veterans Benefits: 1-800-827-1000
- For Social Security/SSI Checks or other Federal Benefit Payments: www.godirect.gov

Company Name

Address

City State Zip



**RE: Changing My Automatic Payment
Attention: Accounts Receivable / Accounting**

I have recently changed banks and would like to have my automatic payment with your company changed to my new account. Please discontinue debiting my old bank account and begin making automatic withdrawals from my new **AVAILA BANK** account. Please contact me with any questions.

Sincerely,

Authorized Signature

Date

AUTOMATIC PAYMENT INFORMATION

NAME		PHONE		<input type="radio"/> DAY PHONE		<input type="radio"/> EVENING PHONE	
ADDRESS		CITY		STATE		ZIP	
\$		AMOUNT DEBITED (enter payment amount or "amount due")					
PREVIOUS BANK NAME		ROUTING NUMBER		ACCOUNT NUMBER			
\$		073902546					
PAYMENT OR REASON		DATE OF PAYMENT					
AVAILA BANK							
NEW BANK NAME		NEW ROUTING NUMBER		NEW ACCOUNT NUMBER			

Bank Name

Address

City State Zip

 **ACCOUNT CLOSING REQUEST**

RE: Close My Accounts

Attention: Account Maintenance

This letter is to inform you that I am closing my accounts at your bank. Please close the following account(s) listed below and send a check for the remaining balance(s) to my address.

If you have any questions regarding this request, please contact me by mail or call me at the phone number listed below. Thank you for your prompt assistance in this matter.

Sincerely,

Authorized Signature

Date

ACCOUNT INFORMATION

NAME

ADDRESS

CITY

STATE

ZIP

PHONE DAY PHONE EVENING PHONE

ACCOUNT #1

ACCOUNT #2

ACCOUNT #3

ACCOUNT #4