

PERSONAL - SWITCH TO US - PAYROLL/DIRECT DEPOSIT FORM



Automatic Payment Transfer Letter

Date: _____

Employer/Depositor Name:

Address

City, State, Zip

Please begin depositing payment(s) directly into my First State Bank account listed below:

First State Bank

Routing Number: 111921777

My Account # _____

If you have any questions about this request, please contact me at ___ - ___ - _____

Thank You

Signature

Name (please print)

Address, City, State, Zip

First State Bank

www.fsathens.com

(903) 676-1900