

Change Payroll Direct Deposit Form

Send this form to employers, government offices or financial institutions that make direct deposits (payroll, Social Security, CD interest payments, etc.) into your account.

Date _____

Employer's/Depositor's Name: _____

Employer's/Depositor's Address: _____

Employer's/Depositor's City, State, Zip: _____

You are currently depositing MY ENTIRE PAYCHECK PART OF MY PAYCHECK (Choose one) into the following account:

Old Financial Institution: _____

Routing Number: _____

Account Number: _____

Please stop making deposits to that account and instead send them to:

AnchorBank, fsb

PO Box 7933, 25 W. Main St., Madison, WI 53703

Routing Number: **275971087**

Account Number (10 digits): _____

Effective Date: _____

If you have any questions about this request please call me at (_____) _____

During the day In the evening (Choose one)

Name (Please Print): _____

Address: _____

City, State, Zip: _____

Signature: _____

MEMO _____ ⑆275971087⑆ ⑆ 01 ⑆ 00000000 ⑆ 00001	This is a sample of an AnchorBank check.
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↑ Routing # (9 digits) ↓

↑ Account # (10 digits) ↓

↑ Check # ↓

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