

SWITCH KIT | CHANGE BANKS FOR THE LAST TIME.

DIRECT DEPOSIT TRANSFER

Please fill out the form to change and authorize your direct deposit to JVB.

COMPANY/EMPLOYER INFORMATION:

DATE: ____ / ____ / ____

Company Name

Mailing Address

City/State/Zip

EFFECTIVE IMMEDIATELY: I AUTHORIZE YOU TO CHANGE MY DIRECT DEPOSIT INFORMATION TO THE JVB ACCOUNT LISTED BELOW:

JVB

Bank Name

BRIDGE & MAIN STREETS

MIFFLINTOWN / PA / 17059

Mailing Address

City/State/Zip

031310219

Account Number

Routing Number

DEPOSIT TYPE:

CHECK ONE Paycheck Soc. Security VA Comp Pension Other

1ST ACCOUNT:

CHECK ONE Checking Savings

\$

1st Account Number

Deposit Amount

2ND ACCOUNT: (OPTIONAL)

CHECK ONE Checking Savings

\$

2nd Account Number (if available)
Amount

Deposit

FORM CONTINUED ON REVERSE SIDE

Rev. 1/16

Member FDIC

jvbonline.com | 1-855-582-5101

The logo for JVB, consisting of the letters 'JVB' in a large, white, serif font, set against a green rectangular background.

DIRECT DEPOSIT TRANSFER

Please fill out the form to change and authorize your direct deposit to JVB.

PLEASE DISCONTINUE SENDING MY DEPOSITS TO:

Former Bank Name

Routing Number

1ST ACCOUNT:

CHECK ONE

Checking

Savings

\$

1st Account Number

Deposit Amount

2ND ACCOUNT: (OPTIONAL)

CHECK ONE

Checking

Savings

\$

2nd Account Number (if available)

Deposit Amount

If you have any questions about this request, please contact me at one of the following numbers: **DAYTIME** () _____ or **EVENING** () _____

I AUTHORIZE:

The above listed entity to initiate deposit of funds to my JVB Checking and/or Savings Account(s).

JVB to credit entries to my account(s).

This authorization to remain in effect until I send written notice of change or cancellation.

Name (Printed)

Name (Signed)

Mailing Address

City/State/Zip