

DIRECT DEPOSIT CHANGE FORM

Name: _____

Employer: _____

Social Security Number: _____

Employee Address: _____

City: _____

State: _____ Zip: _____

Note: To change your Social Security direct deposit please call 1-800-772-1213 or 1-800-325-0778 (TTY).

I hereby authorize my employer named herein to deposit my net paycheck or other periodic payment in the checking account listed below. This request is to remain in effect until changed by me in writing. My employer may also debit or credit the account outside of set payroll periods to make adjustments directly related and withholdings for benefits.

First National Account Number: _____

Signature: _____

Date: _____

Routing Number: 091901477
First National Bank of Northfield
P.O. Box 59
329 Division Street South
Northfield, MN 55057



firstnationalnorthfield.com ■ Member FDIC

DOWNTOWN ■ 329 Division Street ■ 507-645-5656 ■ FAX 507-645-6873
SOUTH ■ 1611 Honey Locust Drive ■ 507-664-0820 ■ FAX 507-664-0801