



“Switch Form”

NOTICE OF CHANGE FOR DIRECT DEPOSIT

Use this form to change your direct deposit(s) to your new Community Business Bank Account(s). Please attach a voided check.

To: _____
Company Name (Payroll/Accounting Dept.)

Mailing Address

City State Zip Phone

From: _____
Name

Mailing Address

City State Zip Phone

Social Security Number

RE: Change of Direct Deposit

PLEASE DISCONTINUE MY CURRENT AUTOMATIC/DIRECT DEPOSIT(S) TO ACCOUNT # _____.

And/or ACCOUNT # _____ WITH _____
Financial Institution

PLEASE BEGIN SENDING DIRECT DEPOSIT(S) TO:

**Community Business Bank
407 East Maple Street, Ste 104
Cumming, GA 30040
Transit/ABA # 061121041**

Deposit entire amount to Community Business Bank # _____ Checking Savings

-OR-

Deposit\$ _____ to Community Business Bank Account # _____ Checking Savings

and the remainder to Community Business Bank Account # _____ Checking Savings

I authorize:

* The above listed entity to change my direct deposit(s) to Community Business Bank as designated.

* Community Business Bank to credit entries to my account(s) as indicated.

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

Signature: _____ Date: _____