



DIRECT DEPOSIT
EASY SWITCH FORM

This form authorizes an employer to deposit payroll or other checks into your new Mascoma Bank account. Please complete one form for each automatic deposit you wish to change. Provide as much information as possible- the information can be found on your new checks or deposit slips and your employee benefits statements. **Upon completion of this form forward it to the Human Resources Department of your employer.**

To:

Employer Name

Employer Address

City, State Zip

From:

Employee Name

Employee Address

Employee SS#

City, State Zip

Telephone #

Please direct my:

Existing Direct Deposit

NEW Direct Deposit

Direct Deposit Amount

To my Mascoma Bank

Checking Account

Savings Account

Mascoma Bank Account Number

211770213

Mascoma Bank Routing Number

Signature

Date

*Attach a deposit slip from your new Mascoma Bank account to this document.

**Employer - if you are unable to accept this document, please forward your authorization form to this employee.