

## Switch ACH Direct Deposit

To change or set up ACH direct deposits, complete this form and send it to your employer or other company that is automatically depositing funds into your bank account. The company initiating the direct deposit may require an additional form or more information.

|                     | Name of Company Initiating Direct Deposit           |                    |                   | _               |
|---------------------|---|--------------------|-------------------|-----------------|
|                     |   |                    |                   |                 |
|                     | Company Address                                     |                    |                   | _               |
|                     |   |                    |                   |                 |
|                     | City, State, Zip                                    |                    |                   | _               |
|                     |   |                    |                   |                 |
| Γο Whom it <b>I</b> | May Concern:  |                    |                   |                 |
|                     | nay concern.  |                    |                   |                 |
|                     | / /, please red<br>erstand that it may take up to 3 |                    |                   | account at PCSB |
|                     |   | Charling Associat  | <b>-</b>          |                 |
|                     | PCSB Account Number                                 | ☐ Checking Account | ☐ Savings Account |                 |
|                     | F CSB Account Number                                |                    |                   |                 |
|                     | 073902397   |                    |                   |                 |
|                     | PCSB Routing Number                                 |                    |                   |                 |
|                     |   |                    |                   |                 |
|                     | Signature   |                    |                   |                 |
|                     |   |                    |                   |                 |
|                     | Date  |                    |                   |                 |
|                     |   |                    |                   |                 |
|                     | Phone Number  |                    |                   |                 |