

FORM A. Direct Deposit Authorization Form



Send this form to your employer, your retirement plan, the Social Security Administration or the Department of Veterans Affairs. For Social Security and Veteran's Affairs benefits, a Martha's Vineyard Bank representative can assist you; find more information at www.mvbank.com/solutions-desk

*Helpful Tip: Be sure to include a voided Martha's Vineyard Bank check with this form. One of the starter checks you received when you opened your account will be fine.

Enter the information for the company making direct deposits to your account:

Company Name _____
Address _____
City _____ State _____ Zip Code _____

Enter your personal information:

Name _____
Address _____
City _____ State _____ Zip Code _____
Phone Number _____ Social Security Number _____

To Whom It May Concern,
I have recently switched financial institutions. Effective immediately, please stop making deposits into my old account and begin making them to my new Martha's Vineyard Bank account indicated below.

New Martha's Vineyard Bank Account Information

Martha's Vineyard Bank Routing Number: 211372925

Account Number _____ Amount \$ _____ Checking Savings
Account Number _____ Amount \$ _____ Checking Savings

Print Name _____ Signature _____ Date _____