



BANK ANNAPOLIS

Member FDIC

The bank that doesn't act like one.

Automatic Deposit (Credit) Change Form



SOCIAL SECURITY, PENSION, DIVIDENDS, INTEREST, OTHER

Company Name: _____

Address: _____ City: _____

State: _____ Zip: _____ Phone: _____

Customer Name: _____

BankAnnapolis Routing # 055002480 Customer Acct #: _____ Checking Savings

Deposit Amount: _____ Frequency of Credit: Weekly Bi-Weekly Monthly

By signing below, the above reference customer authorizes their ACH automatic deposit of said amount to be credited to their account with BankAnnapolis as of this date.

(Authorized Signer) (Print Name) (Date)

P.O. BOX 2279
ANNAPOLIS, MD 21404-2279



BANK ANNAPOLIS

Member FDIC

The bank that doesn't act like one.

Automatic Deposit (Credit) Change Form



SOCIAL SECURITY, PENSION, DIVIDENDS, INTEREST, OTHER

Company Name: _____

Address: _____ City: _____

State: _____ Zip: _____ Phone: _____

Customer Name: _____

BankAnnapolis Routing # 055002480 Customer Acct #: _____ Checking Savings

Deposit Amount: _____ Frequency of Credit: Weekly Bi-Weekly Monthly

By signing below, the above reference customer authorizes their ACH automatic deposit of said amount to be credited to their account with BankAnnapolis as of this date.

(Authorized Signer) (Print Name) (Date)

P.O. BOX 2279
ANNAPOLIS, MD 21404-2279