

DIRECT DEPOSIT

To Whom It May Concern:

I authorize _____ (Company Name) to change my direct deposit instructions.

I have closed my checking account savings account.

Former Direct Deposit Location:

Financial Institution: _____

Account Number: _____

Bank Routing Number: _____

Please Direct My Deposits To My Cortland Banks:

Checking Account - Account Number: _____

Savings Account - Account Number: _____

CORTLAND BANKS

194 West Main Street
P.O. Box 98
Cortland, OH 44410
Routing Number # 041209307

Name: _____

Deposit Amount (if applicable): \$ _____

If you have any questions about this request, please contact me at: _____
Address

Phone

Thank You.

Sincerely,

Signature

Signature {If applicable.}

Printed Name

Printed Name {If applicable.}

Date of request

AUTOMATIC PAYMENTS

To Whom It May Concern:

I authorize _____ (Company Name) (Account Number) _____ to draw payments from my Checking/Savings account. This authority will remain in effect until I notify you in writing to cancel, allowing time for the financial institution to act on it. I can stop payment of any entry by notifying my financial institution at least 5 days before my account is charged.

My Current Automatic Payments Are Drawn From:

Financial Institution: _____

Account Number: _____

Bank Routing Number: _____

Please Switch My Automatic Payments To:

CORTLAND BANKS

194 West Main Street
P.O. Box 98
Cortland, OH 44410
Routing Number # 041209307

Account Type (Checking/Savings): _____

New Account Number: _____

If you have any questions about this request, please contact me at: _____
Address

Phone

Thank You.

Sincerely,

Signature

Signature {If applicable.}

Printed Name

Printed Name {If applicable.}

Date of request