FIRST COMMUNITY BANK
Division of Glacier Bank

Member FDIC

Direct Deposit Authorization

Customer Instructions:

Complete this form and submit it to your employer (or to whomever will be making payments to you) to start using Direct Deposit, or to change an existing Direct Deposit arrangement. Please make sure that all of your personal information is correct, and keep a copy for your records.

For Social Security Direct Deposit: Call (800) 772-1213 or go online @ https://secure.ssa.gov

Personal Information

Name _____ SSN _____

Street Address _____

Address Line 2 _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Account Information

Bank Name **First Community Bank Utah, Division of Glacier Bank** Account Type _____

Routing Number **124300754** Account Number _____

Deposit Information

Effective: ☐ Immediately ☐ Beginning on: _____

Amount: ☐ Entire Net Pay ☐ % of Net Pay _____ (%) ☐ Specific $ _____ (Amount)

Authorization

To Employer/Payor Name: _____

I authorize the above Employer/Payor to initiate credit entries, and if necessary, to initiate any debit entries and adjustments to correct any erroneous credit entries for Direct Deposit of above payroll/other amount to my above account at First Community Bank, on a recurring basis until I notify you in writing that I revoke this authorization.

X _____ Date: _____