



## Redirect your direct deposits/payments

I authorize \_\_\_\_\_ (company name) to accept this signed form as authorization to direct deposit/credit the indicated account at Park National Bank. I understand it may take up to 30 days to process this request.

Name \_\_\_\_\_

Phone number \_\_\_\_\_  Home  Cell

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Bank account number \_\_\_\_\_  Checking  Savings

\_\_\_\_\_

Bank routing number \_\_\_\_\_ Effective date \_\_\_\_\_

Check only one:

- New authorization for direct deposit/payment. Not currently using direct deposit/payments.
- Please change my existing authorization. Transfer automatic deposit/payments from my previous bank to Park National Bank.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Joint signature \_\_\_\_\_ Date \_\_\_\_\_