

**NCF Savings Bank**  
**Switch Kit**  
**Authorization to Change Your Direct Deposit**

Complete this form for each company or organization with whom you have arranged for *Direct Deposit*. Call NCF at any of our offices: **New Carlisle** – (937)845-3636, **Springfield-Villa** – (937)342-1999, or **Springfield-Limestone** – (937)471-4590 for additional forms, or make copies of this form.

I hereby authorize direct deposit to my new \_\_\_\_\_ checking or \_\_\_\_\_ savings account at NCF Savings Bank.

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Company Address

\_\_\_\_\_  
My/Our Account Number at This Company

**New Bank ABA Routing Number: 242272463**

\_\_\_\_\_  
My New Account Number

\_\_\_\_\_  
My/Our Signature(s)

\_\_\_\_\_  
Daytime Phone Number

\_\_\_\_\_  
Date