



201 South Jefferson Street • PO Box 207 • Sigourney, Iowa 52591  
Phone 641-622-2525 • Fax 641-622-2893 • Toll Free 877-611-2525

**AUTHORIZATION FOR DIRECT DEPOSIT**  
(Complete a separate authorization for each Direct Deposit.)

TO: Company \_\_\_\_\_  
Attn: \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_

RE: Authorization for Direct Deposit to My Account at County Bank

I am requesting that you accept and process my Direct Deposit authorization as shown below. Please begin making Direct Deposits into my account at **County Bank** effective this date.

If you have any questions in regard to this request, please contact me at the telephone, e-mail or mailing address shown here. Thank you.

Sincerely,

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

**DIRECT DEPOSIT INFORMATION**

\_\_\_\_\_  
Name Social Security Number Employee ID or Account # (if applicable)

\_\_\_\_\_  
Address City, State, Zip

\_\_\_\_\_  
Day Phone Evening Phone E-Mail  
**073903891 PO Box 207, Sigourney, IA 52591**

\_\_\_\_\_  
County Bank Routing Number County Bank Address

\_\_\_\_\_  
My County Bank Account # Type (checking/savings, etc) My County Bank Account # Type (checking/savings, etc)

My Direct Deposit allocation will be 100% to the one account listed unless stated as follows: \_\_\_\_\_

A deposit slip or voided check is attached to verify new account information:  Yes  No