

DIRECT DEPOSIT SIGN-UP FORM

NAME OF PAYEE (FIRST, MI, LAST)	TYPE OF DEPOSIT ACCOUNT <input type="checkbox"/> Checking <input type="checkbox"/> Savings
ADDRESS	ACCOUNT NUMBER _____
CITY STATE ZIP	TELEPHONE NUMBER ()
EMPLOYER NAME	EMPLOYEE IDENTIFICATION NUMBER
ADDRESS	CITY STATE ZIP
TELEPHONE NUMBER ()	ATTENTION

FINANCIAL INSTITUTION INFORMATION

Eagle National Bank
8045 West Chester Pike, Upper Darby, PA 19082

Routing Number
031902041

FINANCIAL INSTITUTION CERTIFICATION (IF REQUIRED BY EMPLOYER)	
PRINT REPRESENTATIVE'S NAME	SIGNATURE OF REPRESENTATIVE
TITLE OF REPRESENTATIVE	TELEPHONE NUMBER ()
Signature of Account Holder	Date