

Direct Deposit Authorization

You can fill out this form online or print the form and complete it by hand and return it to your employer or the party establishing your direct deposit payments.

Use this form to authorize your employer, retirement and pension funds, or any other agency to deposit your payment directly into your Panacea account. Use one form for each direct deposit.

Notification of Direct Deposit Authorization Change		
Company or Employer:		
City, State, Zip:		
Phone Number:		
Employee ID:		
Effective immediately, please deposit the set amount of \$ from my check to my Panacea account. I authorize (name of depositor) to automatically deposit funds into the account below. This authorization shall remain in place until I have submitted a new		
authorization, or until this authorization is changed or revoked by me in writing.		
Place an X next to your desired option.		
Set amount to Panacea CHECKING	G	
Account #:	Routing #:	
Set amount to Panacea SAVINGS Account #:	Routing #:	
	J	
Signature:	_ Date:	
Name:		
Address:		
City, State, Zip:		
Phone Number:		

Direct Deposit Checklist:	
Use this list to remember	
all your direct deposits	
you need to transfer.	
These are the most	
common direct deposits.	
Payroll	
Investments	
Retirement Plans	
Social Security	