

Direct Deposit Change Request

To: (please print name of contact person and company)

From: (please print name)

Account/ ID number:

Address:

Re: Change of Direct Deposit Routing

Please discontinue sending my automatic direct deposit to account number(s)

_____ at _____. Please

begin to send the same deposit to Caribbean Union Bank located at P.O. Box W2010, Friars Hill Road, St. John's, ANTIGUA.

Deposit Instructions:

Deposit the entire amount to account number _____

Deposit \$_____ to account number _____ and the remainder to account number _____

I authorize:

- Above listed entity to initiate deposit of my funds to my Caribbean Union Bank account
- Caribbean Union Bank to credit entries to my account(s)
- This authorization to remain in effect until I send written notice of change or cancellation

Signature _____ Date _____
