

*This form authorizes an employer to deposit payroll or other checks into my Bryn Mawr Trust bank account. Please complete one form for each automatic deposit you wish to change.*

**To** \_\_\_\_\_

Employer Name \_\_\_\_\_

Employer Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Employee ID Number \_\_\_\_\_

*I have opened a new account at Bryn Mawr Trust. Please  
direct my    existing direct deposit    new direct deposit  
to my new Bryn Mawr Trust account number:*

\_\_\_\_\_

*ABA/Routing Number 031908485*

**From** \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

*Attach a Bryn Mawr Trust  
voided check or deposit  
ticket here.*

**Questions?** Call 610.525.1700