

DIRECT DEPOSIT CHANGE REQUEST FORM

Use this form as a guide for the transfer process. You'll need to obtain an official Direct Deposit form from your employer.

To: _____ (Direct Deposit Source)
From: _____ (Your Name)
Address: _____ (Street Address)

Social: _____ (Your Social Security Number)

Change Direct Deposit Routing

Please discontinue sending my automatic direct deposit to the following account numbers:

Discontinued Account: _____ (Bank Name) _____ (Account Number)
Discontinued Account: _____ (Bank Name) _____ (Account Number)
Discontinued Account: _____ (Bank Name) _____ (Account Number)

Please send the same deposit to:	_____ (Credit Union Name)
	_____ (Street Address)
	_____ (Address Line 2)
	_____ (City, State Zip)
	Transit/ABA# _____ (Routing Number)

Direct Deposit Instructions

Please deposit according to my selection below:

Deposit entire amount to checking account number: _____ (Account Number)
 Deposit _____ (\$Amount) to savings account number: _____ (Account Number)
and the remainder to checking account number: _____ (Account Number)

I hereby authorize:

- Above listed entity to initiate deposit of my funds to my _____ (Credit Union Name) checking or savings account.
- _____ (Credit Union Name) to credit entries to my account(s).
- This authorization to remain in effect until I send written notice of change or cancellation.

Signature: _____ Date: _____