

DIRECT DEPOSIT SWITCH KIT FORM

USE THIS FORM TO AUTHORIZE YOUR EMPLOYER TO DIRECTLY DEPOSIT YOUR PAYROLL CHECK OR OTHER CREDIT TO YOUR CREDIT UNION SAVINGS OR CHECKING ACCOUNT.

Employer Name: _____

<u>Step 1</u> Complete this form.

TO:

Use (1) form for each separate request

Step 2

Submit this form to your employer or H/R Dept.
Or the originator of the credit deposit

	Employer Address:				
	City:				-
	FROM: Employee/Individual Name: Social Security Number:		Employer ID#		
	Employee/Individual Address: City: Phone:	State: _		_ Zip:	
Please complete <u>one</u> of the following:					
Redirect My Existing Direct Deposit From My Current Financial Institution to the Greater Cincinnati Credit Union -or Establish A New Direct Deposit With the Greater Cincinnati Credit Union					
The Account I Would Like My Check Automatically Deposited Into: Savings -or Checking My Credit Union Account No: Credit Union A/B/A Routing No: 2420-7667-2					
I authorize and the Greater Cincinnati Credit Union to automatically deposit my check into my account listed above. This authorization will remain in effect until I have filed a new authorization or until this authorization is revoked by me in writing.					
EMPLOYEE/INDIVIDUAL SIGNATURE: Date:					