

Direct Deposit Request Form

Company/Institution Name (e.g., "Social Security Administration")

Address City State Zip

Phone Fax

Account Holder's Name Account Number

Address City State Zip

Home Phone Work Phone

To whom it may concern:

You are currently depositing my paycheck to the following account:

Financial Institution Name: _____

Routing Number for Institution: _____

Account Number: _____

As of _____ (date), please start making this automatic deposit into my account at:

FourLeaf Federal Credit Union

Routing Number: 221473652

Account Number: _____

If you have any questions about this request, please contact me at _____.

Signature _____ Date _____

Complete and send this form to each company where you have an arrangement for deposits into your account.