

change payroll direct deposit



Date

Employer/ Depositor's Name

Address

City, State, Zip

To My Employer:

You are currently depositing **MY ENTIRE PAYCHECK / PART OF MY PAYCHECK** (circle one)
to the following account:

Financial Institution Name: _____

Routing Number: _____

Account Number: _____

Effective _____ (date), please stop making deposits to that account and instead
send them to:

Financial Institution Name: _____

Routing Number: **311376591**

Member Number: _____

Checking _____ Savings _____

If you have any questions about this request, please contact me during the
DAY / EVENING (circle one) at (_____) _____ (phone number).

Thank You.

Sincerely,

Signature

Name (please print)

Address

City, State, Zip

Other Information Your Employer May Need (SSN, Employee ID#, etc.)