

# Direct Deposit Request Form

## Step 2

To: \_\_\_\_\_  
Employer Name & Address

\_\_\_\_\_  
Name of Employee Employee ID Number

\_\_\_\_\_  
Address City State Zip

\_\_\_\_\_  
Home Telephone Number Work Telephone Number

I wish to change my direct deposit:

Bank Name: \_\_\_\_\_  
Bank Routing Number: \_\_\_\_\_  
Account Number: \_\_\_\_\_

Effective \_\_\_\_\_ please start making this direct deposit into my account at:  
Date

**Catholic Federal Credit Union**  
**6180 State St.**  
**Saginaw, MI 48603**  
**Routing Number:**  
**Account Number:**

**Checking Account**

**Savings Account**

I authorize the above name organization to send my payroll to Catholic Federal Credit Union for the purpose of automatically depositing funds to my designated Catholic Federal Credit Union account.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

