



# DIRECT DEPOSIT ENROLLMENT FORM

(Forward completed form to your payroll office or any other organization that regularly sends you a payment.)

☐ INITIAL AUTHORIZATION      ☐ CHANGE IN AUTHORIZATION

## 1. MEMBER INFORMATION

LAST NAME	FIRST NAME	MI	SOCIAL SECURITY NUMBER	
STREET ADDRESS			CITY	STATE      ZIP CODE

## 2. EMPLOYER/COMPANY/ORGANIZATION'S INFORMATION

EMPLOYER/COMPANY/ORGANIZATION	EMPLOYER NUMBER			
STREET ADDRESS			CITY	STATE      ZIP CODE

## 3. ACCOUNT INFORMATION

DEPOSITORY NAME URW COMMUNITY FEDERAL CREDIT UNION		ROUTING/TRANSIT NUMBER 251480482	
PRIMARY ACCOUNT <input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS	ACCOUNT NUMBER		AMOUNT OF DEPOSIT <input type="checkbox"/> NET PAY <input type="checkbox"/> OTHER \$ _____
SECONDARY ACCOUNT <input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS	ACCOUNT NUMBER		AMOUNT OF DEPOSIT <input type="checkbox"/> NET PAY <input type="checkbox"/> OTHER \$ _____

## 5. AUTHORIZATION

I hereby authorize the above Employer/Company/Organization to initiate deposit of my funds to my URWFCU account(s). This authorization will remain in effect until I provide written notice of change or cancellation of this direct deposit.

SIGNATURE	DATE
-----------	------

## 4. DISTRIBUTIONS (For Credit Union's Use)

Total Deductions: \$ \_\_\_\_\_ Effective Date: \_\_\_\_\_

### ADD/CHANGE

01	\$ _____	LN _____	\$ _____
02	\$ _____	LN _____	\$ _____
03	\$ _____	LN _____	\$ _____
04	\$ _____	LN _____	\$ _____
05	\$ _____	LN _____	\$ _____
06	\$ _____	LN _____	\$ _____
IRA _____	\$ _____	LN _____	\$ _____

### DELETE

01	\$ _____	LN _____	\$ _____
02	\$ _____	LN _____	\$ _____
03	\$ _____	LN _____	\$ _____
04	\$ _____	LN _____	\$ _____
05	\$ _____	LN _____	\$ _____
06	\$ _____	LN _____	\$ _____
IRA _____	\$ _____	LN _____	\$ _____

### Recipient Info

Member #	S or L	ID	Amount
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

### Recipient Info

Member #	S or L	ID	Amount
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Member's Signature \_\_\_\_\_ Employee's Initials \_\_\_\_\_