SF Fire Credit Union

DIRECT DEPOSIT AUTHORIZATION FORM

Submit this form to your employer or any company or organization that you want to automatically deposit funds into your SF Fire Credit Union checking or savings account. You may make additional copies if necessary.

MEMBER INFORMATION (PLEASE PRINT): NAME ADDRESS CITY STATE 71P ID NUMBER (PAYROLL, SOCIAL SECURITY, OR EMPLOYEE ID NUMBER) HOME PHONE I hereby authorize Direct Deposit of my paycheck/recurring payment to my SF Fire Credit Union checking or savings account. Please make this change effective: (DATE)_____ **NEW FINANCIAL INSTITUTION INFORMATION:** SF Fire Credit Union Routing/Transit Number 321076506 Choose One: **Checking Account Number** ACCOUNT NUMBER Savings Account Number ACCOUNT NUMBER _ Note: Your employer may require additional forms. DIRECT DEPOSIT AUTHORIZATION FORM TIPS If your employer requires you to complete their own Direct Deposit Authorization form, you may find the following information to the property of the properthelpful. 1001 John Q. Member 1234 Main Street 1. Routing / ABA Number Anytown, CA 95555 2. Account Number 3. Check Number (Do not use) SF FIRE **CREDIT UNION** 1 0 0 0

