



Direct Deposit Authorization Form

Please complete this form and send it to the payroll department at your employer, along with a voided check or deposit slip. If you receive direct deposits from other organizations (e.g. IRA distribution) or government agencies (e.g. Social Security) that you would like to move to EECU, you should mail completed copies of the form to them as well.

To (Employer or Organization): _____

Beginning immediately, I would like to have my paycheck or other periodic payment deposited into the EECU account listed below. I would also like to discontinue any other direct deposits that I currently have established with other financial institutions.

Name of Payee (Your Name): _____

Address: _____

City: _____ State: _____ Zip: _____

EECU
P.O. Box 1777
Fort Worth, TX 76101

ABA/Routing Number: 311981614

Member Account Number: _____

Checking Savings

I hereby authorize and instruct the company or organization named above to deposit my paycheck or other periodic payment into the EECU account described above, and to discontinue any other direct deposits that may currently be in place. This request is to remain in effect until changed by me in writing.

Signature

Date