

Direct Deposit Information

To have funds deposited electronically to your account by your employer or your benefits provider/administration, please print and complete ALL the information below & return to your payroll department at your place of employment or to your benefits administration provider.

Name: _____

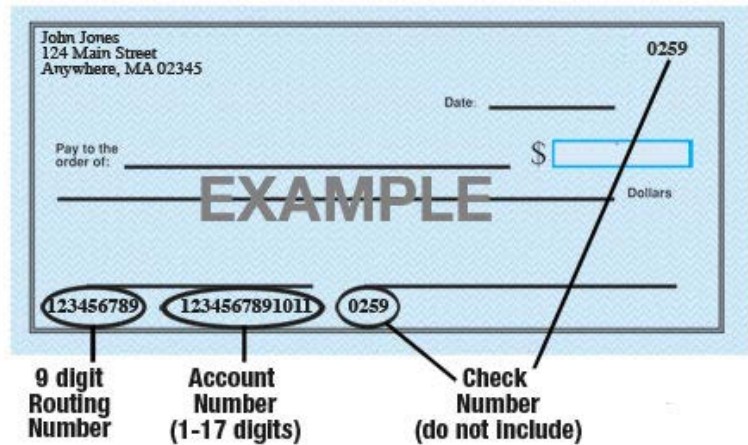
Address: _____

City, State, Zip: _____

If you are using a checking account, you can find your account number as shown in the example to the right.

If you want to deposit to savings, the member number shown on your monthly statement is the account number you will use.

There is only one number that is different between the two account numbers—the checking account has ONE extra number at the end that your member number does not have.



Name of Financial Institution: Old South Federal Credit Union

Account #: _____ (if you are depositing to savings, this is your member # from your statement)

9-Digit Routing #: 265377905 **Social Security Last Four #** _ _ _ _

Amount: \$ _____ _____ % or Entire Paycheck

Type of Account: Checking Savings (Check One)

Your employer or benefits provider may require a voided check copy (if depositing to checking) attached to this sheet.

_____ [Company/Provider] is hereby authorized to directly deposit my pay to the account listed above. This authorization will remain in effect until I modify or cancel it in writing.

Employee's Signature: _____

Date: _____