



# Direct Deposit Information

Member #: \_\_\_\_\_ Effective Date: \_\_\_\_\_

Member Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

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

## Authorization to Begin Direct Deposit

I hereby authorize \_\_\_\_\_ to deposit my pay automatically into the selected account(s).

Signature \_\_\_\_\_ Date: \_\_\_\_\_

In addition, I authorize any necessary debit entries and/or adjustments for any credit entries in error. This authorization will remain in effect until \_\_\_\_\_ has received written notification from me of its termination in such time to afford the payroll office and depository institution a reasonable opportunity to act.

## Primary (Net) Deposit

Please check appropriate box:  Checking  Savings Account #: \_\_\_\_\_

Institution Name: Aurora Federal Credit Union Routing Number: 307074454

## Second Deposit

Fixed Dollar Amount: \$ \_\_\_\_\_

Please check appropriate box:  Checking  Savings Account #: \_\_\_\_\_

Institution Name: Aurora Federal Credit Union Routing Number: 307074454

## Third Deposit

Fixed Dollar Amount: \$ \_\_\_\_\_

Please check appropriate box:  Checking  Savings Account #: \_\_\_\_\_

Institution Name: Aurora Federal Credit Union Routing Number: 307074454

## Authorization to Discontinue Direct Deposit

I hereby authorize \_\_\_\_\_ to discontinue the direct deposit of my payroll funds to:

Institution Name: \_\_\_\_\_  Primary  Second  Third

Signature \_\_\_\_\_ Date: \_\_\_\_\_