

Direct Deposit Change Form

To Whom It May Concern:

I am requesting that my direct deposit be redirected.

Current Financial Institution: _____ Account #: _____

Employee: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Social Security #: _____ or Employee ID #: _____

I authorize my direct deposit to be routed to:

Chaco Credit Union
100 South Third Street
Hamilton, OH 45011
Routing #: 242278360

Account #: _____ Checking Savings

Employee Signature: _____ Date: _____