

## **Direct Deposit Request**

Complete and sign this form for every party (i.e. employer, vendor) initiating a direct deposit to your account. Then, give this signed form, along with a voided check from your new Southern Credit Union account, to the party making the direct deposit.

Establish Dir	ect Deposit	Change my Existing Direct Depos	it	
Employee Name				
Employee Number _				
Name of Employer _				
Employer Address _				
Southern Credit Uni	on			
508 National Ave., C	hattanooga, TN 37	404		
Southern Credit Unio	on Routing Number	: 261388888		
Southern Credit Union Checking Account Number:			(or)	
Southern Credit Unio	on Savings Account	Number:		
Payroll Number		Effective/Start Date		
			Weekly	
Checking	[ACCT#]	[AMOUNT] \$	Bi-Weekly	
Savings	[ACCT#]	[AMOUNT] \$	Monthly	
Net Check				
Southern Credit Unic until further notice f	on for each payroll prom me. If this is a comme.	loyer named above to deposit the a period beginning on the effective/st change in a previous authorization, of follow this authorization.	art date indicated above and	
Member Signature		Da	Date	