



Community Credit Union

Direct Deposit/Payroll
Change Request: Switch Kit

*Submit this form to your employer or any company that you wish to automatically deposit funds to your Checking or Savings account.

Date _____

TO: _____

Employer/Agency

Street Address

City, State, Zip

FROM: _____

Primary Account Holder

Social Security #

Secondary Account Holder

Social Security #

Street Address

City, State, Zip

RE: CHANGE OF DIRECT DEPOSIT ROUTING

Please discontinue sending my automatic direct deposit to account(s)

Account# _____ Financial Institution _____

Please remit the funds via ACH to Community Credit Union using the account number shown below. If you are unable to process funds through ACH, the remittance should be mailed to:

Community Credit Union

757 Redwood Drive

Garberville, CA 95542

Attn: Name on Account

Account number: _____

Routing # 321180874

I hereby authorize the institution above to initiate deposit of my funds to my CCU account. This authorization will remain effective until I produce written notice of change or cancellation to the original institution.

Signature

Date