



## SWITCH MY DIRECT DEPOSIT



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

Name (please print) \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

I authorize (company / organization) \_\_\_\_\_ to automatically deposit my paycheck/direct payment into my account listed below.



P.O. Box 927  
Adrian, MI 49221

Credit Union Routing Number: **272485291**

Credit Union Account Number (most are 13 digits) \_\_\_\_\_

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

Other information your employer may need (SSN, Employee ID#, etc.)  
\_\_\_\_\_

*Note: If available, attach a voided check from your new account to this form.*