



Direct Deposit SoEasy Change Form

Give or send this to your present employer. Your employer may require you to complete additional forms.

To:

From:

Employer's Name

Member Name

Employer's Address

Member Address

City State Zip

City State Zip

To Whom It May Concern:

Please redirect my Direct Deposit to my NuUnion Credit Union account as instructed below.

Account Type:

Checking Savings

Effective:

Immediately Date to Begin _____

My NuUnion Account Information:

Account Number

272482265

Routing Number

If you have any questions about this request, please contact me at the following number:

Phone Number Day Evening

Signature

Date

Attach a voided check from your NuUnion Checking Account.