

# DIRECT DEPOSIT

## Authorization Form

*(Mark selections with an "X")*

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

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

\_\_\_\_\_ Start Direct Deposit

\_\_\_\_\_ Change financial institution to Sooper Credit Union

\_\_\_\_\_ Change account information within Sooper Credit Union

\_\_\_\_\_ Change amount sent to Sooper Credit Union

Sooper Credit Union Routing/Transit Number: **302076017**

\_\_\_\_\_ Checking    \_\_\_\_\_ Savings **(check one)**

Account Number: \_\_\_\_\_

\_\_\_\_\_ Deposit all of my check

\_\_\_\_\_ Part of my check (specify amount per pay period): \$ \_\_\_\_\_

Sooper employee verification that information is accurate:

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

**IMPORTANT:** Please attach a voided check if a Sooper Credit Union representative has not signed the above verification.

### Sign Below

I hereby authorize and request my employer to make payment of my earnings by initiating credit or adjustment entries to my account listed above. I also authorize and request Sooper Credit Union to accept any such entries or adjustments to my account without Sooper Credit Union being responsible for the correctness thereof. If funds to which I am not entitled are deposited to my account, I authorize my employer to direct Sooper Credit Union to return said funds. Such automatic deposits will be made on each successive payday unless I terminate this agreement. Cancellation of direct deposit needs to be directed to my employer's payroll department.

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