

DIRECT DEPOSIT ACCOUNT CHANGE REQUEST

TODAY'S DATE

COMPANY MAKING DIRECT DEPOSIT

ADDRESS

CITY

STATE

ZIP

TO WHOM IT MAY CONCERN:

You are currently making a direct deposit into the following account:

Current Bank: _____

Current Routing number: _____

Current Account number: _____

Please begin making this direct deposit into my new account on: _____
(Date)

Financial Institution: Education First Credit Union

Routing number: 244077271

Account number: _____

399 E. Livingston Ave.

ADDRESS

Columbus

OH

43215

CITY

STATE

ZIP

PHONE#:

CREDIT UNION REPRESENTATIVE

If you have any questions about this request, please don't hesitate to call. Thank you.

Sincerely,

SIGNATURE

DATE

NAME (PLEASE PRINT)

PHONE DAY / EVENING (circle one)

ADDRESS

CITY

STATE

ZIP

(BE SURE TO KEEP A COPY OF THIS DOCUMENTATION FOR YOUR FILES.)



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