

Direct Deposit Change Form

To Whom It May Concern:

Please have my payroll check automatically deposited into the following account as instructed below:

Effective: Immediately Beginning _____

My New Bank Account Information:

Cincinnati Federal
6581 Harrison Ave
Cincinnati, OH 45247

Amount to be deposited: Total Check Specific Amount of Deposit \$ _____

Account Type: Checking Savings

Bank Account Number

Bank Routing Number

Amount to be deposited: Remaining Amount of Deposit

Account Type: Checking Savings

Bank Account Number

Bank Routing Number

If you have questions about this request, please contact me at: _____

I authorize _____ and Cincinnati Federal to automatically deposit my payroll check into my account(s) as listed above. This includes authorization to correct any entries made in error. This authorization will remain in effect until I give written notice to change it.

Signature

Printed Name

Date