

# Direct Deposit Authorization

Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Name of Company Making Deposit \_\_\_\_\_

Mailing Address \_\_\_\_\_

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

To Whom It May Concern:

Please Deposit:  my entire check  part of my check to the following account: \$ \_\_\_\_\_

Financial Institution: **ElectTel Cooperative Federal Credit Union** FI Routing Number: **253176930**

Account Number: \_\_\_\_\_  Checking  Savings

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

Daytime ( \_\_\_\_\_ ) \_\_\_\_\_ Evening ( \_\_\_\_\_ ) \_\_\_\_\_

Name (Please Print) \_\_\_\_\_

Signature \_\_\_\_\_

Mailing Address \_\_\_\_\_

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



*This credit union is federally insured by the National Credit Union Administration and is an Equal Housing Lender.*



COOPERATIVE FEDERAL CREDIT UNION

*Your Co-op, Your Credit Union*

[www.electtelccu.org](http://www.electtelccu.org)

800.849.5600