

Payroll Direct Deposit

Fill out the form below and submit to your employer.

Change Payroll Direct Deposit

Date:

Your Name:

Employed by:

Employer's Address :

City/State/Zip:

To Whom It May Concern:

I authorize (company information) _____

to accept this signed form to direct my payment/credit to my Fort Knox Federal Credit Union checking/savings account.

Routing Number: 283978425 _____ Account Number: _____

Thank You. _____

Sincerely,

Signature

Co-Signer Signature

Name:

Address:

City/State/Zip:

Other information your employer may need - Employee ID#, etc.):

Please contact me at telephone number:

(day or evening).