

change payroll direct deposit



Date

Employer/Depositor's Name

Address

City, State, Zip

To Whom It May Concern:

You are currently depositing **MY ENTIRE PAYCHECK / PART OF MY PAYCHECK** (circle one) to the following account:

Financial Institution Name: _____

Routing Number: _____

Account Number: _____

Effective _____ (date), please stop making deposits to that account and instead send them to:

Financial Institution Name: Truliant FCU

Routing Number: 253177832

Member Number: _____

If you have any questions about this request, please contact me during the **DAY / EVENING** (circle one) at (_____) _____ (phone number).

Thank you.

Sincerely,

Signature

Name (please print)

Address

City, State, Zip

Other Information Your Employer May Need (SSN, Employee ID#, etc.)