

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:

Old Financial Institution: _____
F.I. Routing Number: _____
Account Number: _____

I have recently changed financial institutions and I hereby authorize you to switch my
direct deposit over to my new account at:

Carolina Collegiate FCU
4480 Rosewood Drive
Columbia, SC 29209
(803) 227-5555

routing number 253978824, account number _____. (Attached is a
voided check)

Please contact me at ____ - ____ - ____ with any questions.
Day-time phone

Thank you,

Signature

Name (Please Print)

Address

City, State, Zip

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