



Direct Deposit Authorization Form

Use this form to request a direct deposit of regular payments from your employer, a retirement payment, Social Security, or from just about anywhere else, into your FTWCCU account. With Direct Deposit, you won't have to worry about lost or stolen checks. When a Direct Deposit is made into your FTWCCU account, it's available for your use without having to worry about a check hold.

Follow these easy steps:

1. Attach a personal check from your FTWCCU account with the word "VOID" written in large letters in ink across the front. Do not sign the check.
2. Sign and date this form.
3. Submit this form and your voided check to your employer or other fund originator.

Your Name: _____

Your Social Security Number: _____

Your Daytime Phone Number: _____

I wish to deposit to my FTWCCU account:(check one) Entire Net Pay _____ % of Net Pay Specific Amt _____

FTWCCU Account Number: _____ Checking Account Savings Account _____ Loan Number

FTWCCU Routing Number: 3119 8167 2

I authorize: _____ to initiate credit entries and, if necessary, to initiate any debit entries and adjustments to correct any erroneous credit entries to my account at FTWCCU.
(Name of Employer or Funds Originator)

Signature: _____ Date: _____

I understand that this authorization will remain in full force and effect until the company named has received written notification from me of its termination with enough time to allow the company and depository a reasonable opportunity to act.

Helpful info:

- **Track your request** to confirm that your money is being deposited into your FTWCCU account. You can view your account activity on our website at www.ftwccu.org or download our mobile application to check your account.
- **Play it Safe** - direct deposit should take effect within three deposit periods. If you don't see it by then, contact your employer or funds originator. Keep your old account open until all direct deposits have been switched to your FTWCCU account.