

DIRECT DEPOSIT REQUEST

(Please complete, sign and submit this form to your payroll department at work.)

Company Name: _____

Employee Name: _____

Employee SSN: _____

Work Phone (Ext): _____

To Whom It May Concern,

As of _____ (date) please deposit _____ (enter a dollar amount or write "all") of my paycheck into the following account:

TruChoice Federal Credit Union
PO Box 10659
Portland, ME 04104
(207) 772-0808



Routing Number: 2112-8830-7

Account Type:
(choose one)

Savings, please provide your member number below:

OR

Checking, please provide the 12-digit MICR number from the bottom of your check below:

7	0	0	6	7	0						
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Notes/Comments:

If you have any questions, please do not hesitate to contact me.

Signature: _____

Date: _____