

Signature:_____

Direct Deposit Change Request

To:	
From:	
Address:	
SSN:	
RE: Change of Direct Deposit F	
Please discontinue sending my auto	omatic direct deposit to:
Account Number:	With:
Account Number:	
Please begin sending the same dep	
1st Ed Credit Union 1156 Kennebec Drive	Direct Deposit Instructions: Account #:
Chambersburg, PA 17201 Routing #: 231379966 Phone: 717-264-6506	☐ Deposit Entire Amount to: ☐ Checking ☐ Savings ☐ Deposit \$ to: ☐ Checking ☐ Savings
I hereby authorize:	
 1st Ed Credit Union to credit entr 	deposit of my funds to my 1st Ed Credit Union account. ries to my account. ffect until I send written notice of change or cancellation.

Date:_____