



# Direct Deposit Change Request

Return this form to your employer's human resources office.

### Direct Deposit Authorization:

Name:

Social Security No:  One Source FCU Account No:

Address:

City:  State:  Zip:

Company Name:

Company Address:

Company City:  State:  Zip:

Please discontinue sending my automatic direct deposit to

Account #  with

### Deposit instructions:

If you'd like to distribute your paycheck to more than one account, please send a copy of this form to One Source Federal Credit Union.

Savings \$   Loan  \$   Other  \$

Checking \$   Loan  \$   Other  \$

One Source Federal Credit Union  
 8870 Gazelle Dr.  
 El Paso , TX 79925  
 Transit/ABA# 312080970

### I hereby authorize:

- Above listed entity to initiate deposit of my funds to my One Source Federal Credit Union checking or savings account.
- One Source Federal Credit Union to credit entries to my account(s).
- This authorization to remain in full force and effect until I send a written notice of change or cancellation.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**NOTE:** FOR VERIFICATION PURPOSES  
 ATTACH A VOIDED ONE SOURCE FEDERAL CREDIT UNION CHECK IN THIS AREA FOR  
 YOUR EMPLOYER'S HUMAN RESOURCES DEPARTMENT