



Automatic Deposit Change Form

Direct Deposit Transfer Request Form

Once you have completed this form, please deliver it to your employer/depositor for processing.

Employer/Depositor

Address

City **State** **Zip**

Telephone Number

To Whom it May Concern:

You are currently electronically depositing funds to the following account:

Financial Institution

Routing Transit Number

Account Number

Please stop depositing to the above account and begin depositing to the account listed below.
New Account Information

Hoosier Hills Credit Union
Financial Institution

283977633
Routing Transit Number

Account Number **Account Type** **Savings** **Checking**

Thank you.
Sincerely,

Name (Please Print)

Signature

Address

City **State** **Zip**

Phone

* Remember to include a voided check with your request