Direct Deposit Change Request

To:

From:

Addr	ess:		
Social Security Num	ber:		
•		ect Deposit Routing:	
	Please discontinue sending my automatic direct deposit to Account #		
		and/or Account #	
	with		
	Please begin sending the	e same deposit to Consumers Credit Union.	
	Consumers Credit Union	's routing information is:	
Credit Union Name:	Consumers Credit Union	Routing Number: 271989950	
Credit Union Address:	1075 Tri-State Parkway		
	Gurnee, IL 60031		
	Deposit Instruction	ns:	
	Deposit entire amou	Deposit entire amount to checking account number #:	
	Deposit \$	to savings account number #:	
	and the remainder to checking account #		
	hereby authorize: Above listed entity to ini or savings account.	tiate deposit of my funds to my Consumers Credit Union checking	
•	Consumers Credit Union to credit entries to my account(s).		
•	This authorization to ren	nain in effect until I send written notice of change or cancellation.	
S	Signature:	Date:	