direct deposit

Send this form to your human resource or payroll office. Some employers require that you use one of their forms.

To whom it may concern,

Please redirect my direct deposit to Canopy Credit Union as instructed below:

Employee name		
Street address		
City	State	Zip
Phone	Work phone	
Social Security # or employee	ID	
Previous financial institution	Acct.#	
I authorize my direct depo Canopy Credit Union 601 W. Mallon Spokane, WA 99201	osit to be s	ent to:
Checking #: 78908 or Savings #:		
Canopy Credit Union's rou	iting #: 325	5182629
Employee signature		Date

