



# Direct Deposit Form

10 BENTON PLACE | PO BOX 40 | SODUS, NY 14551

Name: \_\_\_\_\_

Social Security #: \_\_\_\_\_

Employer Name: \_\_\_\_\_

Employer Phone: \_\_\_\_\_

Employee # (if applicable): \_\_\_\_\_

### What would you like to do with your direct deposit/payroll?

Start

Change

Cancel

### Into what account would you like your payroll to go?

Savings Account # \_\_\_\_\_

Checking Account # \_\_\_\_\_

HSA Checking Account # \_\_\_\_\_

*To find your account # within online banking, click on your preferred account history, click "Account Details" and use the "ACH Number" to complete this form.*

### Routing and Transit #

2 2 2 3 8 2 4 3 8

### How much of your payroll do you want coming to Reliant?

Send my entire paycheck (net pay) to Reliant

Send \$ \_\_\_\_\_ per paycheck to Reliant

Send \_\_\_\_\_ % per paycheck to Reliant

I hereby authorize my employer to send the amount indicated above to my account at Reliant Community Federal Credit Union until further notice.

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