



Direct Deposit Transfer Request Form

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

Employer/Depositor Name

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:

Beacon Credit Union

Financial Institution

274976151

Routing Transit Number

_____ : Account Type _____ Savings _____ Share Draft Checking

Account Number:

Thank you.

Sincerely,

Name (Please Print)

Signature

Address

City, St, Zip

Phone

*Remember to include a voided check with your request