



**SPACE COAST
CREDIT UNION**

DIRECT DEPOSIT AUTHORIZATION

Your life. Your financial watchdog.

NEW

CHANGE

I hereby authorize _____ to deposit my pay to the account at the financial institution indicated below. I further acknowledge that it is my responsibility to notify the Human Resources Department of _____ of any changes in the financial institution, account number or allocation of funds.

CHECK ONE BOX BELOW:

- CHECKING ACCOUNT – account and routing number noted above
 - SAVINGS ACCOUNT – account and routing number noted above
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When signing up for Direct Deposit to **Checking/Money Market** Accounts please use the following ABA and MICR/ACH Account Number information:

Routing (ABA) Number: 263177903

MICR/ACH Account Number: _____

Attn: check printer: Start MICR account in position 32; end in position 19 with account symbol.

Note to Human Resources: *This MICR Number replaces the need for a voided check*

When signing up for Direct Deposit to **Share Savings** only, please use the following ABA and ACH Account Number information:

Routing (ABA) Number: 263177903

ACH Account Number: _____

Employee Printed Name

Employee Signature

Date

Social Security Number