



PREMIER FINANCIAL CREDIT UNION

Clinton Township Office - 38770 Garfield Rd., Suite 120, Clinton Township, MI 48038
Detroit GASCO Office - 3200 Hobson St., Detroit, MI 48201

AUTHORIZATION FOR DIRECT DEPOSIT (Change of Financial Institution)

All you need do is:

1. Mark the box before type of account to indicate whether your pay will be deposited in your checking or savings account.
2. Fill in your name, financial institution name, location and date.
3. Attach a voided check for verification of all financial institution information. If you are unable to attach the voided check, please fill in your account number.

NOTE: Be sure to sign the form!

My Name: _____
 Social Security Number: _____
 My Address: _____
 My Contact Phone Number: _____

AUTHORIZATION Please fill out and return to the Payroll Department

I authorize (insert company/organization name) _____ to initiate electronic credit entries, and if necessary, debit entries and adjustments for any credit entries in error to my:

(choose one) **Checking Account** or **Savings Account** each pay period.

I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. This authority will remain in effect until I have cancelled it in writing.

Date: _____
 Financial Institution Name: **Premier Financial Credit Union**
 Account Number at Financial Institution: _____
 Financial Institution Routing/Transit Number: **272 078 491**
 Financial Institution City and State: **Clinton Township, MI**
 Financial Institution Phone Number: **586.416.3700**

Signature _____

PLEASE KEEP A COPY OF THE AUTHORIZATION FORM FOR YOUR RECORDS