

Direct Deposit Request Form

202212-IC-FO-DD-ENG

INSTRUCTIONS AND NOTES:

Routing and Transit Number:

• "Payee" refers to the ICCU member/person receiving the Direct Deposit.

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- Complete this page, Direct Deposit Request Form, and return it to your check issuer (your payroll dept, social security office, etc.)
- Complete the Direct Deposit Distribution Form and return it to your local ICCU branch.

Payee's Name:		
Claim or Payroll ID Numb	er:	
In signing this for	Account Number: m I authorize my payment to be sent to the other of the designated account(s).	
Payee's Signature:		Date:
Send payment to:	Illinois Community Credit Union 508 W State Street Sycamore IL 60178 815-895-4541	



Direct Deposit Redistribution Form

202212-IC-FO-DD-ENG

INSTRUCTIONS:

Note to ICCU Member: This form provides instructions to Illinois Community Credit Union on how you would like your direct deposit distributed between your accounts. Forward the completed form to your ICCU branch.

Member Name:	Member Number:				
Telephone Number:					
Please select one:					
The above redistribution instructions are for a new Direct Deposit					
The above redistribution instructions are for an <i>existing</i> Direct Deposit.					
A Direct Deposit was established with: (Name of the check issuer)					
Once the deposit is made to my account, please redistrib	oute the funds as follows:				

Account	Number	Amount		
Shares	01	\$		
Checking	02	\$		
Club		\$		
Loan		\$		
Loan		\$		
Visa		\$		
		\$		
		\$		
		\$		
		\$		

Member Signature:	Date:	