



## Direct Deposit Authorization Form

**Date:** \_\_\_\_\_

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

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Action:**                       New                       Change

**Account Number:** Please use the account number directly followed by the 3-digit suffix you would like your funds to be deposited in, no spaces or dashes.

\_\_\_\_\_

**Type of account:**               Savings               Checking

**Routing number:** 272480694

**Financial Institution:** Preferred Credit Union  
3767 Sparks Dr., SE  
Grand Rapids, MI 49546  
1-800-328-4131

**Notes:**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_