



Direct Deposit

I hereby authorize _____ (employer) to initiate credits to my account indicated below and authorize Tulare County Federal Credit Union to credit my account.

Employee's Name: _____

Employer's Name: _____

Social Security Number: _____

Account Number: _____

Check One: Checking
 Savings

Financial Institution: Tulare County Federal Credit Union
Routing Number: 321178158

This authority is to remain in force and effect until Tulare County Federal Credit Union has received a written notification from me of its termination and Tulare County Federal Credit Union has had a reasonable opportunity to act on it or until Tulare County Federal Credit Union's termination of this agreement.

Employee's signature: _____

Date: _____