



Direct Deposit Authorization

Date _____ SSN# _____ Name: _____

Name of Employer _____

Employer's address _____

Employer's phone _____

My direct deposit is currently going to:

Previous Financial Institution _____

Previous Financial Institution Address _____

Previous Account Number _____

Please change my direct deposit to go to:

New Financial Institution: **ISU Credit Union**
275 S. 5th Ave Ste 210
Pocatello, ID 83201
(208) 235-7100

Routing Number: **324173639**

New Account Number: _____ (no spaces or dashes/10 digits max)

Deposit into suffix: _____ Savings _____ Checking

I hereby request that my direct deposit be made to ISU Credit Union.

Signature _____

Name _____

Address _____

City/State/Zip _____

Phone(s) _____

Effective date: _____