

## **Direct Deposit Authorization**

To initiate Direct Deposit of your payroll to Oswego County FCU or to change your existing Direct Deposit, please complete the form below, *print the form*, sign it and return it to your payroll department. With Direct Deposit your pay is typically available for withdrawal the day of or the evening before you receive your paper check.

Name		
E-Mail		
Member Number		
SocialSecurity # or Ta	x ID Number	
Payroll Number		
I hereby authorize you to directly deposit my  net pay or  from my pay each pay period until further notice and transmit the same to Oswego County FCU.		
□ Start □ Cha	nnge mm/yy Effecti	ve Date
Please credit my Oswego County FCU account as follows  to my Share Savings Account  to my Checking Account		
<b>Employee Signature</b>		

Please attach a voided check to this form in order for your payroll department to verify the accuracy of your account number and our Routing & Transit number.

## ATTENTION PAYROLL DEPARTMENT: OSWEGO COUNTY FCU'S ROUTING & TRANSIT NUMBER IS xxxxxxx.

WHEN KEYING AN OSWEGO COUNTY FCU ACCOUNT NUMBER INTO YOUR PAYROLL SYSTEM, DROP THE LAST FOUR DIGITS OF THE ACCOUNT NUMBER (AS LISTED ON THE VOIDED CHECK) AND ADD AN 8 IF THE DIRECT DEPOSIT IS GOING TO THE EMPLOYEE'S CHECKING ACCOUNT OR A 0 IF IT IS GOING TO THE EMPLOYEE'S SAVINGS ACCOUNT. IF YOU HAVE ANY QUESTIONS, PLEASE CALL OSWEGO COUNTY FCU'S ACCOUNTING DEPARTMENT AT XXXXX FOR ACCOUNT NUMBER VERIFICATION PRIOR TO SUBMITTING THE DIRECT DEPOSIT.

Print Out This Form