

Main Office: 215 2nd Ave, New York, NY 10003 Tel.: (212) 533-2980 Fax: (212) 995-5204 www.UkrNatFCU.org

DIRECT DEPOSIT AUTHORIZATION FORM

Please complete this form and give it to your employer/payer

Customer Name		SNN#
	Address	
City	State	Zip Code
Please have my paycheck autom	atically deposited into l	the following accounts:
Checki	ing account number	
Savings/Mone	ey Market account num	nber
22	6078544	
Ukrainian Na	tional FCU routing num	ber
I hereby authorize to automatically deposit my paycheck into m correct entries made in error). This authorization will remain in effect until		-
Customer signature		 Date

