Direct Deposit Form

DIRECT DEPOSIT AUTHORIZATION *(Please Print)*

To sign up for Direct Deposit, fill out this form completely and turn it into your payroll department. If you are unsure of your Depository Account Number or would like to verify it, you may bring this form in or call us and we will verify your information. Please be sure to sign and date your Direct Deposit Authorization (bottom of form) before submitting it to your payroll department.

_____ Name	_____ Social Security Number
_____ Address	(_____) Phone Number
_____ City State Zip	_____ Employer Address
_____ Name of Employer	(_____) Employer Phone Number

TYPE OF DEPOSITOR ACCOUNT

☐ Savings   ☐ Checking

This Box for Allotment (Partial) Payment Only *(if applicable)*

☐ Savings $ _____   ☐ Checking $ _____

DIRECT PAYMENT TO:

SkyOne Federal Credit Union
14600 Aviation Blvd., Hawthorne, CA 90250
Routing/Transit Number: **322077779**

_____
Depository Account Number

I hereby authorize direct deposit of my paycheck to SkyOne Federal Credit Union. I further understand that it may take up to 60 days to initiate the direct deposit to my new Checking Account.

Member Signature _____   **Date** _____