



Main Branch
 1117 28th St. P.O. Box 375
 Manistee MI 49660
 231-723-3400

Parkdale Branch
 11778 Kemmer Rd. P.O. Box 375
 Manistee MI 49660
 231-398-0431

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Filercu.com



AUTHORIZATION AGREEMENT FOR DIRECT DEPOSIT

Please review and complete the following information.
 Return this form to your employer.

Direct Deposit Authorization:

Name: _____ Social Security Number: _____

Address: _____

City: _____ State: _____ Zip: _____

Company Name: _____

Company Address: _____

Company City: _____ State: _____ Zip: _____

Deposit instructions:

- Deposit entire amount to Checking Account: _____
- Deposit \$ _____ to Savings Account: _____
 and the remainder to Checking Account: _____

Filer Credit Union
 PO Box 375
 Manistee MI 49660

Routing/Transit number: **272479867**

I hereby authorize:

- Above listed entity to initiate deposit of my funds to my Filer Credit Union checking or savings account.
- Filer Credit Union to credit entries to my account(s).
- This authorization to remain in full force and effect until I send a written notice of change or cancellation.

Signature: _____ Date: _____