BUFFALO POSTAL
• COMMUNITY •
FEDERAL CREDIT UNION
Achieving your dreams together...since 1935.

Change Direct Deposit Request

Please complete and send this form to any company or organization that is automatically depositing funds into your existing checking account.

_____ _____ _____
Employee's Last Name First Name M.I.

_____
Address (Including Apt # etc.)

_____ _____ _____
City State Zip Code

To Whom It May Concern:

You are currently depositing (Check One) ☐My Entire Check ☐Part of My Check into the following account:

Financial Insitution:_____

Address:_____ City:_____State:_____Zip:_____

Routing #:_____ Account #:_____

Please stop depositing into the account listed above, and begin depositing it into the financial institution listed below as of (Check One): ☐ Immediately ☐Date:_____
If this form is not sufficient to change my direct deposit, please forward your authorized company form for my signature. If you have any questions about this request please contact me at my daytime phone number (____)-_____.

Buffalo Postal Community FCU
Routing & Transit #222079466

Member #:_____

Deposit Instructions:
(Check One)

☐ Deposit entire amount to my Share Draft(Checking) Account

☐ Deposit $_____ amount to my Share (Savings) Account & the rest into my Share Draft (Checking) Account.

X_____ Date:_____
Authorized Member's Signature

If you have any questions, please contact Buffalo Postal Community FCU at (716) 854-2458.