

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#
	<b>A</b> ddress	
City	State	Zip Code
Please have my paycheck autom	natically deposited into th	e following accounts:
Check	ring account number	
Savings/Mon	ey Market account numb	er
22	6078544	
Ukrainian Na	itional FCU routing number	er
I hereby authorize to automatically deposit my paycheck into r correct entries made in error). This authorization will remain in effect unti	ny account listed above (this i	-
Customer signature		 Date

