

DIRECT DEPOSIT CHANGE/ORIGINATION REQUEST

Employer/Organization

Address

City

State

Zip

Employee

Social Security #

To Whom It May Concern:

Please discontinue sending my automatic direct deposit to
Account # and/or account #
with (financial institution).

Please initiate direct deposit with **Altura Credit Union**. The routing information is:
Altura Credit Union
2847 Campus Parkway
Riverside, CA 92507
Transit/ABA #: 322281235

Deposit instructions:

Deposit entire amount to checking account number

Deposit \$ to savings account number

Remainder amount to checking account #

I authorize:

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

Signature _____

Date _____

If you have any questions regarding the process of an Electronic payment or deposit, please call Altura Credit Union's Payroll/ACH Coordinator at (888) 883-7228.