



# Direct Deposit Change Request

Use this form to have deposits automatically made from your employer or other payer to your account at Virginia Educators Credit Union.

**To:**

Employer/ Other Payer Name: \_\_\_\_\_

Payer Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Please discontinue sending my automatic direct deposit to:**

Financial Institution Name: \_\_\_\_\_

Name on Account: \_\_\_\_\_

Account Number: \_\_\_\_\_

**Please switch my deposits to this Virginia Educators Credit Union account:**

Effective:  Immediately  Beginning: \_\_\_\_/\_\_\_\_/\_\_\_\_

Checking  Savings

Account Number: \_\_\_\_\_

Routing Number: 251481355

Virginia Educators Credit Union

12626 Nettles Drive

Newport News, VA 23606

(757)930-2425

**If you have any questions please call me at:** (\_\_\_\_) \_\_\_\_ - \_\_\_\_ .

**I hereby authorize:**

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

Name (print): \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_