

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 Buffalo Police Federal Credit Union. The routing information is:

Buffalo Police Federal Credit Union
74 Franklin Street Room 103
Buffalo, NY 14202
Transit/ABA #: 222079453

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 fund to my Buffalo Police Credit Union checking or savings account.
- Buffalo Police 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 Buffalo Police Credit Union at (716) 851-4490.