

Direct Deposit Direct Payment

Please use this information for
Direct Deposit and Direct Payment to your
Members Credit Union account.

Financial Institution Name:

Members Credit Union

Routing Number: 272485385

Account Number: _____

Account Type: Savings Checking

Member: Electronic digit required for all electronic
transactions, obtain from Members Credit Union

If you have any questions about this request, please
contact me during the DAY/EVENING (circle one) at
_____(phone number).

Signature: _____

Name (please print): _____

Address: _____

City, State, Zip: _____

*Mail or Submit to company initiating the Direct Deposit or
Direct Payment. Keep copy for your records.*