

## Direct Deposit Authorization Form

Company/Employer Name	Claim or Payroll ID Number
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I authorize the above named **Company/Employer** and the financial institution listed below to make electronic deposits each payday to the account type(s) listed below.

Name of person entitled to payment (Last, First, MI)		Social Security Number
Address	City, State, Zip	
Home Telephone	Work Telephone	

**Check the account type(s) below for your direct deposit. Forward form to your employer or other source of direct deposits.**

For direct deposit into a Tower savings account, list your account number up to 6 digits.

**Savings Acct. No.** \_\_\_\_\_

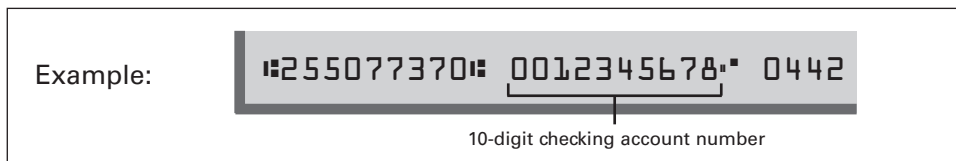
Total check amount     Partial check in amount of \$ \_\_\_\_\_

For direct deposit into a Tower checking account, list your 10-digit account number.

**Checking Acct. No.** \_\_\_\_\_

Total check amount     Partial check in amount of \$ \_\_\_\_\_

Your 10-digit checking account number is printed on the bottom of your personalized checks, as shown in the example below. If you do not have any checks, call the Member Service Center at the number above, contact us through E-Mail Manager at [towerfcu.org](http://towerfcu.org), or visit a branch to request your 10-digit checking account number.



Name and Address of Financial Institution	ABA/Routing Number
Tower Federal Credit Union P.O. Box 123 Annapolis Junction, Maryland 20701	255077370

If monies to which I am not entitled are deposited to my account, I authorize my **Company/Employer** to direct the financial institution to return said funds. This authority will remain in effect until I have filed a new authorization, or until revoked by me in writing, or upon termination of my employment with said **Company**.

Signature	Date
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