

# authorization to move direct deposit

I have closed my checking account at:

Name of Previous Financial Institution

I would like my Direct Deposit to go to the following account effective (date)

Name of Credit Union

Name on Account

Account Number – Include the 14 digits (beginning with 8) located at the bottom of your CCF checks.

Social Security Number

Daytime Telephone Number

Please establish Direct Deposit with my new account at:

**Cornerstone Community Financial Credit Union**  
**2955 University Drive**  
**Auburn Hills, MI 48326**  
**Routing Number: 272477429**

Signature

Date

## To Complete This Form:

- 1 Enter the name of the financial institution where you're closing your account.
- 2 Enter the date you want your new direct deposit to take effect.
- 3 Enter the name on the account, your Cornerstone Community Financial account number, your social security number, and your daytime phone number.
- 4 Sign and date the authorization form.
- 5 Give a copy of this form to each depositor (employer, Social Security Administration, etc.) with whom you have a Direct Deposit arrangement
- 6 Return a copy to Cornerstone Community Financial, and keep a copy for your records.