

Step 2

SWITCH DIRECT DEPOSIT

Your employer may require another form.



Date: _____

Employer/Depositor's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

To Whom It May Concern:

You are currently depositing MY ENTIRE CHECK PART OF MY CHECK or my (type of payment) _____ to the following account:

Former Financial Institution: _____

Routing Number: _____

Account Number: _____

Please switch my direct deposit of: the full net amount or _____ to the below account:

Michigan Schools and Government Credit Union

Routing Number: 272480173

Saving/Checking (circle one) Account Number: _____

If you have questions about this request or require anything further, please contact me at (_____) _____.

Your prompt attention to this request is appreciated. Thank you.

Sincerely,

Signature: _____ Date: _____

Name (please print): _____

Address: _____

City: _____ State: _____ Zip: _____