

# Direct Deposit Change Authorization



\_\_\_\_\_  
Date

\_\_\_\_\_  
Employer or other Depositor's Name

## To Whom It May Concern:

You are currently making direct deposits on my behalf to this account:

Old Bank: \_\_\_\_\_

Routing Number: \_\_\_\_\_

Account Number: \_\_\_\_\_

Please discontinue direct deposits to the above account and immediately start direct deposits to my account at:

### **Gulf Winds Credit Union**

220 E. Nine Mile Road

Pensacola, FL 32534

**Routing Number:** 263281679

Account Number: \_\_\_\_\_  Checking  Savings

## Instructions:

Your employer or another organization may be making direct deposits to your bank account.

If so, this form authorizes them to change that deposit to your Gulf Winds account.

Complete this form, print it, sign it, and provide it to your payroll office and any other payer who makes automatic deposits to your account.

Print as many copies as you need.

## We're Here to Help

If you have any questions, please give us a call at 800.650.6328 or email [info@gogulfwinds.com](mailto:info@gogulfwinds.com).

If you have any questions about this request, please contact me at:

\_\_\_\_\_ (phone number)  Day  Evening

Thank you.  
Sincerely,

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State/Zip

**GoGulfWinds.com**

220 E. Nine Mile Road | Pensacola, FL 32534 | 850.479.9601 | toll free: 800.650.6328 | fax: 850.433.2856

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