



## ACCOUNT INFORMATION FOR DIRECT DEPOSIT

The following account holder has an account with Bridge Credit Union, Inc.

This form is to be used in place of a voided or canceled check for the purpose of authorizing direct deposit to our institution.

### ACCOUNT HOLDER INFORMATION

Account Owner Name:

Social Security Number:

### ACCOUNT INFORMATION

Name of Financial Institution: BRIDGE CREDIT UNION, INC.

Routing Number: 244077909

Account Number/Member Number:

### AMOUNT/DISTRIBUTION *(List NET - for full direct deposit)*

\$ \_\_\_\_\_  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_

☐ Checking ☐ Savings ☐ Loans  
☐ Checking ☐ Savings ☐ Loans  
☐ Checking ☐ Savings ☐ Loans  
☐ Checking ☐ Savings ☐ Loans

X

Account Owner/Employee Authorized Signature

Date

Federally Insured by NCUA



**Bridge Credit Union, Inc.**

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Email is not a secure communication. We recommend you do not email this form.