



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/DISTRUBUTION <i>(List NET - for full direct deposit)</i>	
\$ _____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Loans
\$ _____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Loans
\$ _____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Loans
\$ _____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Loans

X

Account Owner/Employee Authorized Signature

Date

Bridge Credit Union, Inc.

1980 W. Broad Street, Mail Stop #0000, Columbus, Ohio 43223 • Toll-Free: 800.434.7300 • Fax: 614.466.5118 • memberinfo@bridgecu.org • www.bridgecu.org

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

