



# 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

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.