



Direct Deposit Form

Let's fund your account! Print and complete a copy of this form for each depositor to notify them that you are authorizing your direct deposit be made to your new Midcoast Federal Credit Union account.

ATTACH A VOIDED CHECK

My account at the following financial institution has been closed:

Name of Former Financial Institution: _____

Former Routing Number: _____

Former Account Number: _____

Name(s) on Account: _____

SSN/TIN: _____

Please establish direct deposit into my Midcoast Federal Credit Union Account:

Routing Number: _____ 211287476

✓ Option 1: Checking MICR Number: _____

✓ Option 2: Savings Account Number: _____

I authorize _____ to automatically deposit my payroll check in the account listed above. This includes authorization to correct any entries made in error. This authorization will remain in effect until I give written notice to cancel it.

Signature: _____ Date: _____

Direct Deposit Acknowledgement (if required)

This letter is to acknowledge the above individual has an account with Midcoast Federal Credit Union. This member is authorized to receive automatic debits or credits from your company and may start immediately. If you have any questions regarding this letter, please contact the Credit Union directly.

Signature: _____ Date: _____

Authorized representative of Midcoast Federal Credit Union.

Empowering Member and community success through financial education, technology and service excellence.

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