



Incoming Direct Deposit

Change Authorization Form

myMAX Service Center (334) 260-2600

Save gas and time by making fewer trips to the branch

Discover the convenience of **Direct Deposit** and save yourself time and effort. You can easily access your money simply by writing a check, using your MAX ChekCard or stopping by any MAX ATM. Fill out the information below and bring it to your local MAX branch or payroll office. Please allow sufficient time for change.

Name of Employer/Other Source: _____

Employer Address: _____

Social Security Number: _____ Date: _____

Employer Phone #: _____

I hereby authorize the above named to deposit my net paycheck or other periodic payment in the account described below. This request is to remain in effect until changed by me in writing. I agree that any funds erroneously deposited into my MAX account in excess of my authorized amount or then current salary may then be withdrawn without any liability or prior notice.

Effective Date: _____

Your Name: _____ Signature: _____

Address: _____

City: _____ State: _____ Zip: _____

Routing Number:

2	6	2	2	7	5	9	5	8
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Account Number:

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(Basic member number or if money market account, write all 14 digits located at bottom of check and mark "checking" as type of account.)

savings checking

* Individual copies will be made for each unique income provider. MAX, Your Community Credit Union® provides this as a complimentary service. MAX is not responsible/liable for any errors, loss, or problems that occur as a result of the submission of this form or transferring of this service.