AUTHORIZATION FOR DIRECT DEPOSIT

IH MISSISSIPPI VALLEY CREDIT UNION
2121 47th Street
P.O. Box 1010
Moline, IL 61266
(309) 793-6200 Ext. 89540

Depositor Name: _____

FOR ELECTRONIC TRANSFER:
Routing Number 271183662

Account Number: _____ (For HSA Savings, contact the ACH Dept.)

Account Type: _____ (Enter "Checking", "Savings", or "Loan")

Loan Suffix: _____ (For use only with Loans)

Amount of Transfer Per Pay Period: ☐ Net Pay ☐ Specific Amount: _____

This Request is: ☐ New ☐ Change _____
(old amount)

The authorization updates any now in effect.

_____ _____
Depositor/ Account Holder Signature Date

_____ _____
Credit Union Employee Name Credit Union Employee Title

For Federal Government Recurring Payments:

Beneficiary Name _____

Payee Name _____

SSN / Claim Number _____

Benefit Type:

- ☐ SSA or SSI (800-772-1213)
- ☐ VA Comp, Pension or Education (877-838-2778)
- ☐ Office of Personnel Mgmt - Civil Service (888-767-6738)
- ☐ Railroad Retirement (877-772-5772)
- ☐ DFAS Retirees or Annuitants (800-321-1080)