IHMVCU

AUTHORIZATION FOR DIRECT DEPOSIT

Depositor Name: _____

FOR ELECTRONIC TRANSFER:
Routing Number 271183662

Account Number: _____ - _____ (Suffix only for use with Loans, HSAs, and Daily Money Markets)

Account Type: ☐ Savings ☐ Checking ☐ Loan ☐ HSA ☐ Daily Money Market

For office use only: "HSA" and "Money Market" selections should be coded as "Savings"

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)

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