

AUTHORIZATION FOR ACH DIRECT DEPOSIT

I authorize you and MidWest America Federal Credit Union to deposit my pay automatically to my checking or savings account each payday. Adjusting entries to correct errors are also authorized. This authority will remain in effect until I have canceled it in writing.

REQUEST TYPE: (Check One) NEW CHANGE DISCONTINUE

COMPANY NAME

COMPANY ADDRESS

CITY STATE ZIP

EMPLOYEE/MEMBER NAME

DEPOSITOR ACCT. NO. SOCIAL SECURITY NO.

MIDWEST ROUTING/TRANSIT NO. 2749-7314-1

DEPOSIT TO: (Check One) Savings /Share Checking /Draft Net Pay Amount \$

Note: Transfer cycles are independent of Direct Deposits and will continue even if Direct Deposits are interrupted by reasons beyond the Credit Union's control.

My signature gives acceptance to all terms and conditions above and authorizes the transfer Cycle listed below.

Member's Signature X Date

TRANSFER CYCLE REQUEST

Please distribute my direct deposit as follows: **Transfer from Share** 1 or 4

		CREDIT UNION USE ONLY	
Savings/Regular Share	S 1	Information Systems:	
Youth Education Savings	S 2		
Kid's Club	S 3	Transfer Cycle	
Checking/Share Draft	S 4		
Share IRA	S 5	Date Sent:	
Vacation Club	S 7		
Christmas Club	S 9	Teller Initials:	
Roth IRA	S 10		
Education IRA	S 12	Branch #	
Loan #			
Other Account #		Member Copy	
Total Distribution			