



SHARONVIEW

FEDERAL CREDIT UNION

PO Box 2070, Fort Mill, SC, 29716
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sharonview.org

Direct Deposit Form

Name: _____

Address: _____

Instructions: Fill in your employer/company's name and select the account that you want to have your deposit going in to (if applicable). Then, fill in the amount of your pay that you want deposited. You can enter in a percentage, or a certain dollar amount. Sign and date this form at the bottom and then submit form to your employer.

Employer/ Company Name

Routing Number

253075303

Account Number(s)

Savings: _____ (Sub# _____)

Checking [MICR#]: _____

Deposit Amount:

Savings: \$ _____ Percentage: _____

Checking: \$ _____ Percentage: _____

Member Signature: _____

Date: _____