

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 Debit Card 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 So	ource:
. ,	
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.	
·	effect until changed by me in writing. I agree that any funds erroneously ount in excess of my authorized amount or then current salary may then be ity or prior notice.
Effective Date:/	
Your Name:	Signature:
Address:	
City:	State: Zip:
ABA Routing Number for M	AX: 2 6 2 2 7 5 9 5 8
MAX Account Number:	□ Savings □ Checking
(Basic member number or if mone of account.)	ey market account, write all 14 digits located at bottom of check and mark "checking" as type
	or each unique income provider. MAX Credit Union provides this as a complimentary service. In yerrors, loss, or problems that occur as a result of the submission service.