



## DIRECT DEPOSIT FORM for use by non-hospital employees

Please print this form, fill-in the required information and present to your employer (payroll department).

Member Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

### CREDIT UNION INFORMATION

Name: Lawrence Memorial Credit Union

Address: 365 Montauk Ave  
New London, CT 06320

Phone: 860-444-5104

Transit & Routing Number: 211178365

Account Number<sup>1</sup>: \_\_\_\_\_ Amount \$ \_\_\_\_\_

<sup>1</sup>Your member/account number followed by the number of the account you wish to have the money deposited (1 for savings, 6 for checking) Example: 123451 for savings, 123456 for checking.

**NOTE:** If you wish to “split your deposit” among several accounts, we suggest that you arrange with your employer to deposit the total amount to one account, and then give us a call to set up an automatic distribution of those funds among your other accounts. You will find this more convenient should you wish to change amounts or accounts.

365 Montauk Avenue, New London, CT 06320  
Telephone: 860-444-5104 | Fax: 860-444-3784 | [www.lmhospccu.com](http://www.lmhospccu.com)

