



# ACH/Payroll Authorization Form

Please print, complete, and submit to your company's Payroll or Human Resources Department.

**Member Name:** \_\_\_\_\_

**Account #:** \_\_\_\_\_

**Company Name:** \_\_\_\_\_

**Transit/ABA #:** 2313-8010-4

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## Payroll Details

**Total Amount Deducted:**  Net Check  
 Partial Deduction \$ \_\_\_\_\_

**Primary Account for Deposit:**  Savings  
 Checking

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## Agree and Sign

I hereby authorize the above named company to begin Automated Clearing House (ACH/ payroll deduction) credit to the above account(s) in the amount(s) listed. In the event the payroll is not forwarded in a timely manner by my company, any loan payments due will be made at the credit union.

**Member Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_