



## Payroll Deduction/Allocation Authorization Form

Name: \_\_\_\_\_ Account #: \_\_\_\_\_  
*(Last First Middle Initial)*

SSN: \_\_\_\_\_ PU ID#: \_\_\_\_\_

Office Phone #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Please list the name of your employer: \_\_\_\_\_

You are paid (circle one):

**Weekly**      **Bi-weekly**      **Semi-Monthly**      **Monthly**

List the amounts to allocate to the following accounts:

(00) \_\_\_\_\_ (CHK) \_\_\_\_\_ (Loans) \_\_\_\_\_ (Other) \_\_\_\_\_

I hereby authorize the Payroll Department of my employer to make regular deductions from my payroll/salary/allotment in the amount of \$ \_\_\_\_\_ each payroll period. This deduction includes deposits to any PFCU share account, and loan payments, if applicable. The amounts will be credited, upon receipt, by PFCU. This payroll allocation request should begin \_\_\_\_\_.

Date: \_\_\_\_\_ Member Signature: \_\_\_\_\_

For credit union use only

Entered on: \_\_\_\_\_ By: \_\_\_\_\_