

**PAYROLL DEDUCTION AUTHORIZATION FOR REMITTANCE TO
TRI-TOWN TEACHERS FEDERAL CREDIT UNION**

I hereby authorize the _____ to:

- (A) Deduct \$_____ each paycheck and remit to the above CU.
- (B) Change the amount now being deducted each paycheck from \$_____ to \$_____.
- (C) Discontinue the deduction of \$_____ now being made.

Dated _____ 20_____ _____
Member's Signature

School/Business Address _____

Residence _____

_____ is a member of the CU
Printed Name

indicated above. _____
Effective Date

TRI-TOWN TEACHERS FEDERAL CREDIT UNION
(Credit Union Copy)

P/R# _____

Name _____ Account# _____

School/Business Address _____

Residence _____

Amount of payroll deduction authorized \$_____

Amount of payroll deduction changed from \$_____ to \$_____

Payroll deduction of \$_____ discontinued

Effective Date _____ 20_____

Soc. Sec. # _____ - _____ - _____

Signature _____

\$ _____	Regular Acct
\$ _____	Holiday Club
\$ _____	Vacation Club
\$ _____	Share Draft
\$ _____	IRA
\$ _____	_____
\$ _____	TOTAL