



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: _____