



WEBER
CREDIT UNION

Payroll Deduction Authorization

P.O. Box 12127, Ogden, UT 84412

www.webercu.com

(801) 334-0400

Routing Transit # 3243-7770-7

Date _____

Company Name _____

Company Address _____

Employee's Name _____

Employee Payroll # _____

Social Security Number _____

Credit Union Account # _____

I hereby authorize you to deduct \$ _____ from my paycheck each pay period (if applicable).

I hereby authorize you to deposit my net payroll check each pay period.

Please deposit these funds to my Share Savings Draft Checking Other _____

I have voluntarily chosen payroll deduction as a method of payment and understand it is not required, nor is it a factor in ruling on loan applications. I understand that any funds deducted may not be withdrawn by me until such time as they are credited to my account. This will remain in effect until revoked.

Signature of Employee _____

Witness _____

For Credit Union Use Only

New Change Cancel

Employee's Initials _____