



## Authorization Agreement For Payroll Deduction

I hereby authorize my employer to deduct from my salary the amounts set forth in this authorization and to deposit these funds at the Credit Union for each payroll period following receipt of this Authorization until further notice from me. I understand that this Authorization is revocable. If this is a change in a previous Authorization, I instruct my employer to cancel my previous Authorization and to follow this Authorization.

Withdraw funds from my payroll and deposit to my (our) Great Lakes Credit Union account.

Initial Authorization

Change in Authorization

\$ \_\_\_\_\_  
Deposit Dollar Amount

Deposit to:  CHECKING  SAVINGS

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Great Lakes Credit Union  
FINANCIAL INSTITUTION NAME

\_\_\_\_\_  
MEMBER NAME

\_\_\_\_\_  
SSN/TIN#:

\_\_\_\_\_  
MEMBER ACCOUNT#

\_\_\_\_\_  
HOME PHONE#

\_\_\_\_\_  
WORK PHONE#

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
EFFECTIVE DATE