MONROEVILLE BORO FEDERAL CREDIT UNION
PAYROLL DEDUCTION AUTHORIZATION / CHANGE

EMPLOYEE NAME _____   ACCOUNT _____

EMPLOYEE # _____   SOCIAL SECURITY # _____

TO PAYMASTER: I hereby authorize the following deduction from each pay totaling $_____
until further notice from me and transmit funds currently to the above named CREDIT UNION.

The amount in the sections below must match the total above

*Write in amount: $ _____   Regular Shares
                           $_____   Christmas Club   Effective Date: _____

EMPLOYE SIGNATURE: _____ DATE SIGNED ____/_____/___

*If allocating your deduction to multiple accounts complete the following:

REGULAR SHARES:

Account # _____ Member Name _____ Amount:_____

Account # _____ Member Name _____ Amount:_____

Account # _____ Member Name _____ Amount:_____

CHRISTMAS CLUB:

Account # _____ Member Name _____ Amount:_____

Account # _____ Member Name _____ Amount:_____

Account # _____ Member Name _____ Amount:_____

Date processed by payroll department   _____

Date processed by credit union   _____