



SOUTH CAROLINA
FEDERAL
CREDIT UNION

Request for Payroll Direct Deposit/Deduction

ABA/Routing Number: 2532-7840-1

_____	_____
(Employee Name)	(South Carolina Federal Credit Union Account Number)
_____	_____
(Social Security Number)	(Employer)
Payment Schedule	<input type="checkbox"/> Weekly <input type="checkbox"/> Biweekly <input type="checkbox"/> Monthly <input type="checkbox"/> Other _____

Payroll Direct Deposit

I would like my direct deposit: **started** **changed** **stopped**

I authorize my employer's payroll office to send my entire net pay (remaining amount after taxes and other deductions by my employer) to my South Carolina Federal account as indicated below:

Savings account number (including suffix) _____

Checking account number (MICR number) _____

Other account number (including suffix) _____

Payroll Deduction

I would like my payroll deduction: **started** **changed** **stopped**

I authorize my employer's payroll office to deduct the amount(s) below from my regular paycheck and send it (them) to my South Carolina Federal account(s) as indicated below. I agree to abide by my employer's rules regarding making changes to these amounts. I understand that my employer's payroll office must receive and process this form before deductions can begin.

Deposit _____ to savings account number (including suffix) _____

Deposit _____ to checking account number (MICR number) _____

Deposit _____ to other account number (including suffix) _____

For Business Development Use Only - South Carolina Federal Allocations

I would like my direct deposit allocation(s): **started** **changed** **stopped**

I authorize South Carolina Federal to distribute my direct deposit in the amount(s) to the South Carolina Federal account(s) as indicated below:

Deposit _____ to savings account number (including suffix) _____

Deposit _____ to checking account number (MICR number) _____

Deposit _____ to other account number (including suffix) _____

Employee's Signature

Date

LIFESIMPLIFIED™

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scfederal.org

pschneider