



Employee Name _____ Social Security No. _____ Member No. _____

I authorize _____ to automatically deposit my net wage payment
each pay period to my:

Checking Account

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Savings Account

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Routing Number 324173626

Employee Signature _____ Date _____

Complete this form and submit it to your employer's payroll clerk. The clerk may have another employer form for you to complete. This form is intended to be an easy way to remember the account numbers you will need to start direct deposit.