PAYROLL AUTHORIZATION FORM

Please complete your name, the company name and the last four digits of your social security number.

Indicate start, modify or stop, the total dollar amount, your credit union account number and where you want these funds deposited, savings or checking account.

Sign, date and return this form to OMEGA Federal Credit Union P.O. Box 15038 Pittsburgh, Pa 15237-0038 Fax 412.369.3828

If you wish to have distributions please complete the form below so that once the funds are deposited, they can be distributed accordingly.

Federal Credit Union P.O. Box 15038 Pittsburgh, Pa 15237-0038	Routing Number 243083347		
PAYROLL AUTHORIZATION	(Account Number)		
Member Name	SS# (last 4 digits)		
Start Modify Stop	Choose One		
\$Net (Entire	Savings Paycheck)		
(Amount)	Checking		
Company Name			
Company Phone (HR or Payroll if available):			
Company Address			
I hereby authorize my employer to initiate start, modify or stop payroll deductions/ direct deposit from each pay to the above financial institution and account number.			
Signature	 Date		
OMEGA Employee #	(PR 1/19)		

PAYROLL DEDUCTION DISTRIBUTION

Please fill out form completely including the frequency that you are paid (Weekly, Bi-weekly, Semi-Monthly or Monthly).

Indicate the dollar amounts that you would like to have distributed into the accounts. These amounts should equal the total amount designated on the Payroll Authorization Form.

For entire Direct Deposit – Enter the dollar amounts you wish to have distributed into your accounts and type <u>Balance</u> where you wish to have the remainder deposited.

IF: Funds are to be disbursed into a different account number please indicate the number in the space provided for other.

Sign, date and return this form to OMEGA Federal Credit Union P.O. Box 15038 Pittsburgh, Pa 15237-0038 Fax 412.369.3828

Federal Credit Union P.O. Box 15038 Pittsburgh, Pa 15237-0038	Savings	
PAYROLL DEDUCTION DISTRIBUTION	Christmas	
Name	Escrow	_\$
	Vacation	_\$
Account #	Money Mkt	\$
Phone Home		
Cell	Misc. Club	_\$
Company	Loan #	_\$
Phone (Work)	Loan #	_\$
Pay Frequency	Loan #	_\$
Distributions are valid for the above company only.	Other	_\$
Notify the credit union if you change employers.	Other	_\$
Signature		
Date	Total Deductions	\$
OMEGA Employee # (PR 1/19)		