LASERS Deduction Authorization Form

Employee Name: _____ SSN: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (Home) _____ (Work) _____ (Cell) _____

I hereby authorize the Louisiana State Retirement System to deduct the amount indicated below from my monthly retirement salary until further notice, and remit the same to Pelican State Credit Union.

Monthly Deduction: $_____ Begin Deduction: _____

Signature: _____ Date: _____

THIS FORM SUPERCEDES AND REPLACES ALL OTHER AUTHORITY FOR THIS DEDUCTION. Payroll deductions are provided as a convenience for both the credit union and the member. The payroll deduction amount listed is to begin on the pay period date stated. If for any reason your paycheck of that date does not reflect the deduction shown, please contact the credit union office. Failure to deduct proper amounts to cover your loan payment(s) with the credit union does not alleviate the obligation for you, the borrower, to make such payment(s). You must remit payments(s) for your loan(s) to the credit union if they are not deducted. I understand that I am to terminate payroll deduction in the same method in which I began it. I wish to continue making my loan payments to payroll deduction until such time as I decide to terminate it by that method. As to future deduction, even in the event of bankruptcy, and if I fail to so terminate, request that payment continue to be made voluntarily to the loan in accordance with my pre-bankruptcy instructions.

Payroll deductions shall be distributed per pay period as follows:

Deduction Deadline: This form must be received by the credit union at least one full calendar month preceding the date of the first deduction.

To Stop or Change Deduction Amounts: Another form must be completed and sent to Pelican State Credit Union.

Where to Send Completed Forms:
Pelican State Credit Union
P.O. Box 40088
Baton Rouge, LA 70835

Questions:
Pelican State Credit Union
225.408.6100 or 1.800.351.4877
LASERS
225.922.0600 or 1.800.256.3000

Member Account # _____

Regular Shares (S1)	$_____
Checking ____	$_____
Other Share _____	$_____
Money Market Shares (S4)	$_____
Christmas Club Shares (S5)	$_____
VISA (L99)	$_____
Loan Type/Suffix _____	$_____
Loan Type/Suffix _____	$_____
Loan Type/Suffix _____	$_____

Other Account # _____
(Optional)

Shares/Loan# _____	$_____
Shares/Loan# _____	$_____