



Instructions for Completing a Payroll Deduction Form

General Information:

This form is used to start, stop and change payroll deduction or direct deposit for account holders that are employed by one of Georgia United's Select Employer Groups. For a complete list of our Select Employer Groups, please click [here](#). It is recommended that you check with your employer as there may be additional forms that may need to be completed to fulfill your request.

Form Instructions:

Complete the following:

1. Identify one of the following:
 - a. Initial Authorization (first request – set up)
 - b. Change in Authorization (change in an amount already established)
 - c. Stop (stops all funds)
2. Name
3. Social Security number
4. Signature
5. Date – Current Date
6. Choose the account in which you would prefer for the funds to be deposited
7. List the account number. Please note: If you are sending money to a checking or money market account you must include the 13 digit checking account number; otherwise, please list the member number.
8. Employer Name - List the name of the employer. This employer must be a Select Employer Group. For a complete list, please see General Information above.
9. Credit Union Payroll # - If you work for a State of Georgia Agency, please list the agency in which you work. All other Select Employee Groups please leave this blank.
10. Choose the deduction amount:
 - a. Net Check (entire check)
 - b. Other amount (this may be any amount you choose)
11. Payroll Period - Choose the frequency in which you are paid
12. Allocations - Choose the accounts in which you would like the funds credited to each pay period.
 - a. If you are allocating funds to a loan, please list the Loan ID number (example: L02)
13. Amount or % – List the amount or percent to be credited to the account



Example:

DIRECT DEPOSIT ALLOCATIONS

(Of your total deduction, list how you want to allocate your money among any of your Georgia United accounts):

Checking	Account Number	123456	\$	25.00	or	%
Savings	Account Number		\$		or	%
Money Market	Account Number		\$		or	%
Loan No.	Account Number	L02 - 123456	\$	175.25	or	%

Where to Send the Completed Form:

You may bring this form to any Credit Union branch location, mail or fax it to:

Mail to – 6705 Sugarloaf Parkway
Duluth, GA 30097
Attention: Accounting Department

Fax to – (770)476-6435

Branch locations – www.georgiaunitedcu.org

PAYROLL DEDUCTION/ DIRECT DEPOSIT

Initial Authorization Change in Authorization Stop

Name _____ SSN _____ - _____ - _____

Signature _____ Date _____

Please deposit to: Checking Savings

(13 digit Account # Required for Checking)

Account Number:

GEORGIA UNITED CREDIT UNION – ABA/ROUTING NUMBER #261171309

Employer Name _____ Credit Union Payroll/ SEG # _____

I hereby authorize you to deduct the following from my pay until further notice, and transmit to Georgia United Credit Union.

Total Deduction (Select one): Net check Other amount \$ _____

Payroll Period Frequency (Select one): Weekly Monthly
 Biweekly Semi-Monthly

DIRECT DEPOSIT ALLOCATIONS

(Of your total deduction, list how you want to allocate your money among any of your Georgia United accounts):

Checking	Account Number	\$	or	%
Savings	Account Number	\$	or	%
Money Market	Account Number	\$	or	%
Loan No.	Account Number	\$	or	%
Loan No.	Account Number	\$	or	%
IRA	Account Number	\$	or	%
Other (enter)	Account Number	\$	or	%
Other (enter)	Account Number	\$	or	%
Other (enter)	Account Number	\$	or	%

Total Deduction: \$ _____

NOTE: It could take 1-2 pay periods to take effect, depending on payroll procedures. Some employers may require you to use their payroll form for processing.

- Please fax the completed deduction form to Georgia United's **Accounting Dept: 770.476.6435**
 - Or, return this form to any Georgia United Credit Union branch.
- Questions? Call (770) 476-6400 ext 3 or visit www.georgiaunitedcu.org

Credit Union Employee _____

