

ELECTRONIC FUND TRANSFER DIRECT DEPOSIT ENROLLMENT FORM

To sign up for EFT, please fill in the information requested in Section 1. Then take this form to The Golden 1 Credit Union. The credit union will complete Section 2. The original white copy of the completed form should then be returned to your payroll department. It is important to keep your payroll department advised of any change in your home address so that you will receive your monthly Direct Deposit Advice, annual tax statements, and other important benefit information.

SECTION 1 (TO BE COMPLETED BY EMPLOYEE)

A. Name of Employee Address City State Zip Code Email Address	B. Employee Social Security # 	C. Employee #
D. Type of Depositor Account (Check Only One) <input type="checkbox"/> Checking (Please attach a voided check) <input type="checkbox"/> Savings		Employer Name Address Phone Number ()
EMPLOYEE CERTIFICATION I certify that I am entitled to the payment identified above, and that I have read and understood the information and instructions on this form. In signing this form I authorize my payment to be sent to the credit union named below to be deposited to the designated account. I authorize amounts transferred after my date of death or transmitted in error to be debited to my account.		
Signature of Employee		Date
Daytime Phone Number ()		

SECTION 2 (TO BE COMPLETED BY CREDIT UNION)

Name and Address of Credit Union THE GOLDEN 1 CREDIT UNION P.O. BOX 15966 SACRAMENTO, CA 95852-1966	Credit Union Account Number (Please show exactly how the number should be recorded. Do not include any spaces or dashes. Include SUB number if applicable.) 	
Branch Name and Number DIRECT DEPOSIT DEPT. Phone Number (916) 732-2900	Routing Number Check Digit 3 2 1 1 7 5 2 6 1	
CREDIT UNION CERTIFICATION I confirm the identity of the above-named payee(s) and the account number. As representative of The Golden 1 Credit Union, I certify that the Credit Union agrees to receive and deposit the payment identified above.		
Signature of Representative	Print or Type Representative's Name	Date