



**HudsonValley<sup>®</sup>**  
**CREDIT UNION**

P.O. Box 1071 | Poughkeepsie, NY | 12602-1071  
 845.463.3011 | hvcu.org

Member Account Number _____
Company name _____

**Direct Deposit Allocation Instructions**

List all shares to receive an allocation, even if changing an existing allocation. This form replaces all previous forms.

Check this box to cancel all allocations.

Member Account Number / Share ID	Amount
_____	Net check _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

**This allocation will begin with my payroll check dated:** \_\_\_\_\_

I understand and agree to the following:

1. Allocations of my direct deposit will continue until canceled by me in writing or until my direct deposit is canceled.
2. Any change/deletion/addition requires completion of a new form. I understand that this will supersede any previous allocations requested.
3. I will not be notified of any automatic allocation; my statement will serve as notification.

\_\_\_\_\_  
 Signature of Payroll Owner

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Print Name

\_\_\_\_\_  
 Daytime Phone Number