



Payroll Deduction Form

Please check your selection in the box below:

New Increase Decrease Cancel

Attention: Payroll Department

Member Name: _____
(Please Print)

Payroll Number: _____

GE Credit Union Account Number: _____

Social Security Number: _____

I am employed by _____

Credit Union Information

Name: GE Credit Union
Address: 265 Sub Way, Milford, CT 06461
Phone: 800.992.8472
Fax: 203.876.9944
Transit & Routing Number: 221182781

I authorize my payroll department to initiate electronic entries to my GE Credit Union account. This would include credit entries, as well as debit entries whenever necessary to correct credit entries that were processed in error.

I hereby authorize you to deduct the following amount from my pay \$ _____ (total amount of all deductions) each payroll pay period until further notice for deposit in the GE Credit Union.

My payroll deductions to be credited as follows:

Share Savings: \$ _____ Checking (Share Draft): \$ _____

Holiday Club: \$ _____ Vacation Club: \$ _____

IRA Savings: \$ _____ Other: _____ \$ _____

Member Signature: _____ Date: _____