



SEFCU Payroll Deduction Form

Member Name

Account #

Social Security #

Employer:

Total Credit \$

Union Deduction:

- Membership must be established prior to deductions.
- Contact your payroll department for direct deposit.
- Changes in amount may take 1-2 pay periods.
- Questions regarding payroll services should be directed to SEFCU's Call Center at (518) 452-8183, (607) 775-5550, or 800-727-3328.

Payroll Department:

I authorize you to deduct the amount specified above from my pay each pay period and forward to SEFCU. I understand that this authorization may be revoked at any time by written notice to you.

Signature _____ Date _____

Signature required for deduction to be processed.



SEFCU Distribution Only

Total \$

Member Name

Account #

Social Security #

	Amount	Account#
Mint Share	_____	_____
Checking	_____	_____
Preferred	_____	_____
Holiday	_____	_____
Owner's Choice	_____	_____
_____	_____	_____
_____	_____	_____
Mort. Holding	_____	_____
IRA	_____	_____
Safari	_____	_____
Related Accts.	_____	_____

	Amount	Account#
Auto	_____	_____
Personal	_____	_____
Line of Credit	_____	_____
Home Equity	_____	_____
Share/CD Secured	_____	_____
Education Loan	_____	_____
Other Loans	_____	_____

- SEFCU initiates distribution changes immediately.
- Distributions to loans are priority.
- Any IRA contributions are credited the year they are received.

Daytime Phone #

E-mail address