

TECHNICOLOR

Federal Credit Union

Reel Action. Real Service. For Reel People.

434 West Alameda Avenue, Burbank, CA 91506-3202



DIRECT DEPOSIT OR DEDUCTION AUTHORIZATION FORM

Name _____

Employer _____

Office Location _____

So. Sec. No. _____ Emp. No. _____

Deduct For: Savings \$ _____

Checking \$ _____

Other \$ _____

All Deductions are
"PER PAYCHECK"

Loan payments are transferred monthly only.

I hereby authorize my employer listed above to initiate deposits and/or corrections to Technicolor FCU. The Credit Union is authorized to credit and/or correct the amounts to my account. The authority is to remain in full force and effect until I revoke it by giving 15 days prior written notice to the Payroll Dept. at the company designated above.

X _____

Member Signature

Date

For Credit Union Use Only

ACH ACCOUNT NO. FORMAT Credit Union Routing No. 322079324

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																					1	0

SAVINGS
CHECKING