

DATE _____

Fax: 585.344.2383

Tonawanda Valley Federal Credit Union

Ten Jefferson Square, P.O. Box 398, Batavia, N.Y. 14021 ~ (585) 343-5627 ~ 1-800-722-8224

Routing & Transit Number for deposits: 222 383 479

PAYROLL DISTRIBUTION

NAME _____ SSN# _____

SIGNATURE _____ PHONE _____

MEMBER # _____ (provide same number to Employer/Other)

1. a. Name of employer, government agency or other depositor sending us your funds:

b. Have you ever had direct deposit from this company before? Yes _____ No, first time _____

What is the total amount being sent to the Credit Union? _____

2. List other companies that currently send funds to your account:

3. Please indicate below how you would like the funds from this company distributed:

\$ _____ Loan # _____, Member # _____

\$ _____ **CHECKING** #1060 _____

\$ _____ Primary Savings # _____

\$ _____ Secondary Savings 300 _____

\$ _____ Secondary Savings 500 _____

\$ _____ Vacation Club 200 _____

\$ _____ Christmas Club 700 _____

\$ _____ Savings Bond Club 800 _____

\$ _____ Additional account # _____ (If other than Primary Savings, Please specify: Vacation Club, Christmas Club, Savings Bond Club, S3, S5, Checking _____) Last **name on account** _____

\$ _____ Additional account # _____ (If other than Primary Savings, Please specify: Vacation Club, Christmas Club, Savings Bond Club, S3, S5, Checking _____) Last **name on account** _____

\$ BALANCE OF Funds to Account # (Checking, Savings, Other) _____

4. This distribution will be effective immediately, unless an alternate date is specified: _____.

5. Please return this form to the Credit Union Office. You will need to notify your payroll department if the total amount of your deduction is changing. Please contact TVFCU if you have any questions regarding your distribution.

6. **A new form must be completed if you wish to change any part of your distribution.**