

# REQUEST FOR

# PAYROLL DIRECT DEPOSIT

# & PAYROLL DEDUCTION



SOUTH CAROLINA  
FEDERAL  
CREDIT UNION™

LIFESIMPLIFIED™

ABA/Routing Number:  
253278401

Employee Name \_\_\_\_\_ South Carolina Federal Account Number \_\_\_\_\_

Employer \_\_\_\_\_ Social Security Number \_\_\_\_\_

Payment Schedule  Weekly  Bi-weekly  Monthly  Other \_\_\_\_\_

## PAYROLL DIRECT DEPOSIT<sup>1</sup>

I would like my direct deposit  started  changed  stopped

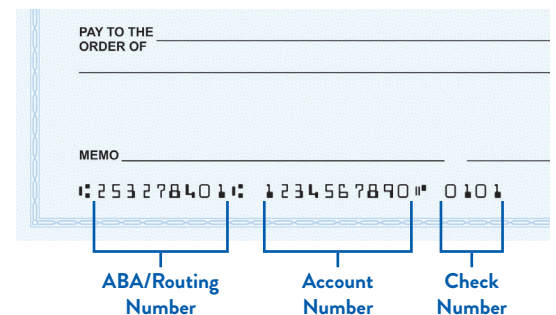
I authorize my employer's payroll office to send my entire net pay (remaining amount after taxes and other deductions by my employer) to my South Carolina Federal account as indicated below:

Savings account number (including suffix)<sup>2</sup> \_\_\_\_\_

Checking account number (MICR number)<sup>3</sup> \_\_\_\_\_

Other account number (including suffix) \_\_\_\_\_

## CHECK SAMPLE



## PAYROLL DEDUCTION<sup>1</sup>

I would like my payroll deduction  started  changed  stopped

I authorize my employer's payroll office to deduct the amount(s) below from my regular paycheck and send it (them) to my South Carolina Federal account(s) as indicated below. I agree to abide by my employer's rules regarding making changes to these amounts. I understand that my employer's payroll office must receive and process this form before deductions can begin.

Deposit \$ \_\_\_\_\_ to savings account number (including suffix)<sup>2</sup> \_\_\_\_\_

Deposit \$ \_\_\_\_\_ to checking account number (MICR number)<sup>3</sup> \_\_\_\_\_

Deposit \$ \_\_\_\_\_ to other account number (including suffix) \_\_\_\_\_

## SOUTH CAROLINA FEDERAL ALLOCATIONS (For Business Development Use Only)

I would like my direct deposit allocation(s)  started  changed  stopped

I authorize South Carolina Federal to distribute my direct deposit in the amount(s) and to the South Carolina Federal account(s) as indicated below

Deposit \$ \_\_\_\_\_ to savings account number (including suffix)<sup>2</sup> \_\_\_\_\_

Deposit \$ \_\_\_\_\_ to checking account number (MICR number)<sup>3</sup> \_\_\_\_\_

Deposit \$ \_\_\_\_\_ to other account number (including suffix) \_\_\_\_\_

## SIGNATURE

Employee's Signature \_\_\_\_\_ Date \_\_\_\_\_

<sup>1</sup>Please consult your employer's payroll office to determine if they require use of their own proprietary direct deposit form in the first payroll direct deposit. <sup>2</sup>Your savings account number is located on your savings account card. <sup>3</sup>If you do not have a check, your checking account card will also have your MICR number.