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River Bend Office
5485 Hwy. 61
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PAYROLL DEDUCTION / TRANSFER FORM

Name Social Security # Total Payroll/Transfer Deduction/ Bank Draft \$

BRECO Account # PLACE OF EMPLOYMENT: PAYROLL GROUP #

New Form Increase Amount Decrease Amount Stop Draft

DISTRIBUTION OF TOTAL DEDUCTIONS/TRANSFER/ WITH IN THE ACCOUNT:

\$ to Loan # \$ to Savings
\$ to Loan # \$ to Checking
\$ to Loan # \$ to Christmas Club
\$ to Loan # \$ to Other

Start Date Weekly Bi-Weekly Monthly Semi-Monthly

(Please check the appropriate box below)

Payroll Deduction

I hereby authorize my employer to deduct from my wage earnings an agreed amount and to remit such amount directly to Breco Federal Credit Union in my behalf. This authorization form completely terminates any previous payroll deductions so please List ALL AMOUNTS to be deducted (including loan payments and other savings deposits).

Transfer from Savings Transfer from Checking Transfer to another Account

Bank Draft/ ACH Origination

I (or we) hereby authorize the BRECO FEDERAL CREDIT UNION hereinafter called company, to initiate debit entries to my (our) CHECKING account indicated below and the DEPOSITORY (bank, savings and loan, credit union) named below, to debit it to such account.

This authority is to remain in full force and effect until BRECO FEDERAL CREDIT UNION and the DEPOSITORY have received written notification from me (or either of us) of its termination in such time and in such manner as to afford BRECO FEDERAL CREDIT UNION AND DEPOSITORY a reasonable opportunity to act upon it.

Drafting Banks TRANSIT/ABA ROUTING NUMBER:

Drafting Banks ACCOUNT NUMBER:

(Please provide a copy of a voided check with this agreement)

Please deduct on the following schedule: Please Check appropriate box

- MONTHLY on the 1st or 15th
SEMI-MONTHLY on the 1st and the 15th of each month
BI-WEEKLY (biweekly transfers are done on Fridays)
WEEKLY (weekly transfers are done on Fridays)

PRINTED NAME: DATE

SIGNATURE:

Sent By: Date: Date Received: