



P.O. Box 59760
Panama City, FL 32412-0760

MEMBER _____

ACCOUNT _____

LOAN _____

SOCIAL SECURITY DEPOSIT/DEBIT AUTHORIZATION

PAYROLL/TRANSFER GROUP ALLOCATIONS

Paycheck _____ Payroll/Transfer Group _____ SSN: _____

New

Change

Cancel

I AUTHORIZE TYNDALL FEDERAL CREDIT UNION TO DISTRIBUTE MY PAYCHECK IN THE FOLLOWING AMOUNTS, AND APPLY THE FUNDS TO THE FOLLOWING ACCOUNTS AS INDICATED BELOW:

MEMBER NUMBER	SURNAM	SUFFIX	GROUP	AMOUNT	START DATE	STOP DATE
1. _____	_____	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____	_____	_____

HAVING PREVIOUSLY REQUESTED MY EMPLOYER TO SEND MY PAYCHECK DIRECTLY TO THE CREDIT UNION, I INSTRUCT THE CREDIT UNION TO DISTRIBUTE MY SOCIAL SECURITY, SOCIAL SECURITY DISABILITY, OR SUPPLEMENTAL SOCIAL SECURITY INCOME ACCORDING TO THE ABOVE SCHEDULE. I AUTHORIZE THE CREDIT UNION TO CHANGE THE ABOVE SCHEDULE AT ANY TIME IN ORDER TO COMPLY WITH THE CREDIT AGREEMENT. THIS AUTHORIZATION IS REVOCABLE BY ME UPON WRITTEN NOTICE TO THE CREDIT UNION, SO LONG AS I AM NOT IN DEFAULT AND MY EMPLOYER IS IN NO WAY BOUND BY OR RESPONSIBLE FOR THESE DEDUCTIONS. THIS PAYCHECK DISTRIBUTION REQUEST CANCELS ALL PREVIOUS PAYCHECK DISTRIBUTION REQUESTS ON FILE AT THE CREDIT UNION.

MY SIGNATURE BELOW AUTHORIZES TFCU TO DISTRIBUTE MY SOCIAL SECURITY ALLOCATIONS TO SHARE ACCOUNTS AND/OR LOANS FOR REPAYMENT.

Signature of Member _____ Date _____ Prepared By _____ Keyed In By _____ 12/2005



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