SOUTHERN SECURITY FEDERAL CREDIT UNION

PAYROLL DEDUCTION/ DIRECT DEPOSIT & ALLOCATION FORM

3337 Summer Avenue, Memphis, TN 38122 (Main Office) • **P.O. Box 22365, Memphis, TN 38122-0365**
Phone: **(901) 452-7900** • Toll-free Phone: **1-800-633-4128** • Email: **MyCU@SouthernSecurity.org** • **SouthernSecurity.org**

Please complete the application here, then print it out, sign and return to Southern Security via mail, fax or in-person.

Date _____ ☐ Start ☐ Change ☐ Stop

PLEASE PRINT

MEMBER NAME		
ADDRESS		
CITY	STATE	ZIP
SOCIAL SECURITY NUMBER		
MEMBER ACCOUNT NUMBER	SOUTHERN SECURITY ABA/ROUTING 284 085 168	
HOME PHONE ( )	CELL PHONE ( )	
EMAIL		

PLEASE PRINT

EMPLOYER		
STREET ADDRESS		
CITY	STATE	ZIP
EMPLOYER PHONE ( )		

This is to authorize my employer to deduct from my salary

☐ **100% of my paycheck each pay period** OR ☐ **$ _____ each pay period**

and remit the same to Southern Security Federal Credit Union *to apply to my Share Account(s). I understand that my account cannot be closed until all payroll deductions have been credited and verified by the credit union.*

Southern Security is to distribute the above sum accordingly:

SAVINGS	**$**	***CHECKING****	**$**	***HOLIDAY CLUB***	**$**
IRA*	**$**	***IMMA****	**$**	***MISC. SAVINGS***	**$**

**Additional application and authorization required before these services may begin.*

This request is effective as of the date above. I understand that this form will replace, in its entirety, any Payroll Deduction/Direct Deposit & Allocation Form I have previously submitted. And I acknowledge changes may take two to three pay periods before they take effect.

x _____ _____
MEMBER SIGNATURE DATE

FOR OFFICE USE ONLY: ☐ *Phone* ☐ *Office* ☐ *Mail* *Staff* _____ *Teller #* _____ *Date* _____