



PAYROLL DIRECT DEPOSIT REQUEST

Attn: Human Resources

Dear Human Resources Representative:

I, _____ would like to make arrangements for the deposit of my payroll check. By signing below, I authorize you, my employer, and the Credit Union indicated below to deposit my pay automatically into the account(s) I have designated.

Indicated below is the information necessary to process this request:

Bank/Credit Union Information: **Luso Federal Credit Union**
599 East Street
Ludlow, MA 01056
Tel. (413) 589-9966
Fax (413) 583-4491

Bank Routing Number: **211883922**

Account #1	Account #2
Type of Account	Type of Account
<input type="checkbox"/> Savings	<input type="checkbox"/> Savings
<input type="checkbox"/> Share Draft Checking	<input type="checkbox"/> Share Draft Checking
Account No. _____	Account No. _____
I wish to deposit (check one):	I wish to deposit (check one):
<input type="checkbox"/> Entire Net Pay	<input type="checkbox"/> Entire Net Pay
<input type="checkbox"/> Dollar Amount \$ _____	<input type="checkbox"/> Dollar Amount \$ _____

Sincerely,

Member Name

_____-_____-_____
Social Security Number

_____/_____/_____
Date

Member Signature

www.lusofederal.com

599 East Street, Ludlow
Phone: (413)589-9966 Fax: (413)583-4491

One Crane Park, Suite 4, Wilbraham
Phone: (413)279-3002 Fax: (413)279-1919

Loan Originator Company Identifier 255907



federally insured by the NCUA

