



Climb Credit Union
 5005 W. 60th Ave.
 Arvada, CO 80003
 (303) 427-5005 • Fax: 303-430-5552
 climbcu.org

**DIRECT DEPOSIT and PAYROLL
 DEDUCTION AUTHORIZATION**

EMPLOYEE/MEMBER INFORMATION					
LAST NAME		FIRST		MIDDLE	
HOME ADDRESS (must be a street address; P.O. Boxes are not acceptable)			APT/UNIT #	CITY	STATE ZIP
HOME PHONE NUMBER			WORK PHONE NUMBER		

DIRECT DEPOSIT AUTHORIZATION

Member: **Check with your employer to see if they will accept this form.** Complete this form if you would like your paycheck deposited in the Credit Union. Please sign at the bottom and attach a savings account deposit slip or a voided check. Then submit this form to your employer.

Dear Employer: Please deposit my entire Paycheck directly into my Credit Union account as follows (check applicable box):

Checking Account No. _____ Savings Account No. _____
 Entire paycheck _____ % of paycheck
 Deposits to start immediately Deposits to start on: _____

My Credit Union's information is as follows:
Climb Credit Union
5005 W. 60th Ave.
Arvada, CO 80003
Routing/Transit Number: 302076017

EMPLOYEE/MEMBER SIGNATURE

By signing below, I authorize and instruct my employer to take the actions indicated above with regard to my paycheck each pay period and to remit said sums directly to the Credit Union. I understand that this Authorization will remain in effect until I cancel it or provide different instructions in writing to my employer. I also understand that I am responsible for changing my distribution from a loan account to a savings account when my loan is paid off. I acknowledge receipt of the Credit Union's Electronic Funds Transfer Act (Reg E) Disclosures.

EMPLOYEE/MEMBER'S SIGNATURE	DATE
X	