



3 S. 555 Winfield Road
 Warrenville, IL 60555
 630-393-7201

DIRECT DEPOSIT/PAYROLL DEDUCTION AUTHORIZATION

Employee Name: _____ Account #: _____

Social Security #: _____ NorthStar ABA/Routing #: 2719-8686-9

Check Only One:

- New Allocation Increase Allocation Decrease Allocation Distribution Chg. Only

Select One Option Below:

Please deduct \$ _____ from each paycheck. **OR**

Please deposit my entire paycheck into my credit union account.
(a separate direct deposit form and/or a voided check may be required from your employer)

I hereby authorize _____ (employer) to deposit my entire payroll check or the allocation selected to NorthStar Credit Union.

Employee Signature: _____ Date: _____

✂ Cut here. Submit top portion to your employer. Submit bottom portion to the Credit Union.

Member Name: _____ Member #: _____

Employer: _____

DISTRIBUTE MY PAYCHECK/ALLOCATION AS FOLLOWS:

Account Types:

Savings	\$	Loan #	\$
Checking	\$	Loan #	\$
Christmas Club	\$	Loan #	\$
Other: _____	\$	Loan #	\$

Member Signature: _____ Date: _____

OFFICE USE ONLY	
Employee Initials: _____	Completion Date: _____