



61 JESUP ROAD  
WESTPORT, CT 06880  
web site: www.tttfcu.org

Telephone: 203.227.8511  
Fax: 203.227.0266

## PAYROLL DEDUCTION AUTHORIZATION FORM

I authorize my payroll point \_\_\_\_\_ to deduct  
Print your town/school payroll location above  
amounts from my pay check as listed below, for deposit to TTTFCU.

NAME \_\_\_\_\_ ACCOUNT # \_\_\_\_\_  
Print your name above Print your TTTFCU account #

Your School/Business Address \_\_\_\_\_

Your Residence Address \_\_\_\_\_

Amount of Payroll Deduction Authorized from each pay check \$ \_\_\_\_\_  
List new amount

Amount of Payroll Deduction Changed from \$ \_\_\_\_\_ to \$ \_\_\_\_\_  
List existing amount changed from – to

Payroll Deduction of \$ \_\_\_\_\_ discontinued.  
fill in only if you are ending your deduction.

Effective Date: \_\_\_\_\_ 20 \_\_\_\_\_

Soc. Sec. #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ \$ \_\_\_\_\_ Shares (savings)  
List your Soc Sec. # for verification Select savings or checking.  
\$ \_\_\_\_\_ Share Draft

Signature \_\_\_\_\_  
Member signature

\$ \_\_\_\_\_ Total

**FAX THIS FORM IN TO 203-227-0266**

REV 1/22