



City of Pittsburgh
Department of Human Resources and Civil Service



Credit Union Authorization Form

My Credit Union is:

- Pittsburgh City Hall Federal Credit Union
- Pittsburgh Firefighters Federal Credit Union
- Greater Pittsburgh Police Federal Credit Union

Soc. Sec. No. XXX - XX - _____

Last four digits ONLY (For verification purposes)

 Employee Name

Please select the action you wish to authorize:

START CREDIT UNION TRANSFER - new set-up or an additional amount to begin.
 Please have \$ _____ deducted from my net pay and sent to the Credit Union.

CHANGE AMOUNT - This will change current amount being transferred.
 I want my deduction changed to \$ _____

Authorization agreement

I hereby authorize the change specified above. I understand that the total amount that I have specified will be sent to the designated credit union. This deduction will be made on each succeeding payday unless I choose to terminate this agreement in writing to Central Payroll. This authorization shall become effective following receipt, verification and processing by Central Payroll.

If monies to which I am not entitled are deposited to my account, I authorize my EMPLOYER to direct the credit union to return said funds. This authority will remain in effect until I have filed a new authorization, or until revoked by me in writing or upon termination of my employment.

Employee Signature: _____ **Today's Date:** _____

Contact phone number: _____

Return to Central Payroll in the City County Building for verification and processing.



GREATER PITTSBURGH POLICE FEDERAL CREDIT UNION

1338 Chartiers Avenue • Pittsburgh, PA 15220

(412) 922-4800 • Fax (412) 922-7556

www.pittsburghpolicefcu.com

Account #: _____ Print Name: _____

PLEASE CIRCLE ONE: New Deduction Increase Deduction Decrease Deduction

Savings: \$ _____ PER PAY Loan # _____ \$ _____ PER PAY

Checking: \$ _____ PER PAY Loan # _____ \$ _____ PER PAY

Holiday Club: \$ _____ PER PAY Loan# _____ \$ _____ PER PAY

Savings 3: \$ _____ PER PAY Loan# _____ \$ _____ PER PAY

Total Deduction \$ _____ PER PAY

SIGNATURE: _____ **DATE:** _____

Greater Pittsburgh Police FCU use only: Date received: _____ Employee initials: _____