



CONSERVATION EMPLOYEES CREDIT UNION
PO Box 180
2915 W Truman Blvd
Jefferson City, MO 65102
Phone: 573-415-2220
Fax: 573-415-2228
cecuonline.org

Authorization For MDC Payroll Withholding Conservation Employees' Credit Union

Employee Name _____
(Please Print)

Social Security # _____ Division _____

Employee Signature X _____ Date: _____

Payroll is semimonthly. The amounts entered below will be withheld from each paycheck.

This form replaces all previous forms and only what is entered below will be withheld.

I hereby authorize Conservation Employees' Credit Union to deduct \$ _____ starting with my
semimonthly paycheck and distribute to my account as follows:

Account No _____

| | | | |
|----------|------------------------------|----------|--------------|
| \$ _____ | Share (Savings) _____ | \$ _____ | Loan # _____ |
| \$ _____ | Secondary Share _____ | \$ _____ | Loan # _____ |
| \$ _____ | Share Draft (Checking) _____ | \$ _____ | Loan # _____ |
| \$ _____ | Secondary Share Draft _____ | \$ _____ | Loan # _____ |
| \$ _____ | Other Account: # _____ | \$ _____ | Loan # _____ |
| \$ _____ | Other Account: # _____ | \$ _____ | Loan # _____ |
| \$ _____ | Other Account: # _____ | \$ _____ | Loan # _____ |

Are you presently participating in salary withholding?

No _____ Yes _____ Amount \$ _____

Increase _____ Decrease _____ New Start _____ No Change _____

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