

College and University Credit Union

Your Union's Credit Union
208 West Kinzie Street - 1st Floor
Chicago, IL 60610
Phone: 312-755-9400

College and University Credit Union Payroll Deduction Form

NAME: _____
LAST NAME FIRST NAME INITIAL

ADDRESS: _____ UNION LOCAL: _____
STREET
CITY, STATE SOCIAL SECURITY NUMBER: _____
ZIPCODE

CAMPUS: _____

DEPARTMENT OR OCCUPATION: _____ TITLE or POSITION: _____

OFFICE USE ONLY
do not write below

HOME PHONE: _____ BUSINESS PHONE: _____
AREA CODE NUMBER AREA CODE NUMBER

NOTE: College and University Credit Union deductions from City Colleges of Chicago paychecks are taken only **once each month—the second pay period of each month.** Again, deductions are taken only **once a month—not each pay period.**

Payroll Supervisor of the City Colleges of Chicago:

I hereby authorize you, until further notice from me, to change the amount of my regular deductions from pay for the Credit Union

from \$ _____ each month
amount

as previously authorized by me,

to \$ _____ each month
amount

effective _____
date

SIGNATURE: _____ DATE

Applicant, return this form to: College and University Credit Union
208 West Kinzie Street - 1st Floor