

PAYROLL DEDUCTION AUTHORIZATION

	PAY DATE	EMPLOYEE NO.	PAY AUTH.
NEW	FREQUENCY	CREDIT UNION ACCT NO.	
CANCEL	WEEKLY		
CHANGE ACCT NO.	BI-WEEKLY		-02
CHANGE DEDUCTION			
NAME (Last, First, MI)		TOTAL CREDIT UNION DEDUCTION	
		\$	

I hereby authorize APCI Federal Credit Union to deduct from my pay the amount specified for payment as indicated.

SIGNATURE	DATE

LOANS	\$ ALT/SCH		TRANSFER ACCT#	\$ AMOUNT		SHARES	\$ AMOUNT
L						S10	
L7						S8	
L6						S5	
L5						S4	
L4						S3	
L3						S2	
L2						S1	
L1							

Last updated: 1/9/01