MOLEX EMPLOYEES FEDERAL CREDIT UNION PAYROLL DEDUCTION AUTHORIZATION

| Employee N | ame: | | Account # | Employee # | |
|---|----------------|-----------------|--|---|--|
| | | | | | |
| Facility Worked At: | | | Please circle one: Semi (Salaried) or Bi-Weekly (Hourly) Payroll | | |
| | | | Semi (Salaried) or Bi-V | veekly (Hourly) Payroll | |
| Cell Phone Number: | | | Start or Change | | |
| I hereby authorize you to deduct the following amount from each paycheck: | | | | | |
| | \$ | | avings (\$10 minimum initimum per pay period need | tial deposit to open account, led for Regular Savings) | |
| + | \$ | Christmas | Christmas Club savings | | |
| + | \$ | Loan #1 Payment | | | |
| + _ | \$ | Loan #2 Payment | | | |
| = | \$ | Grand Total (M | Grand Total (New Deduction Amount Each Pay Period) | | |
| Empl | oyee Signature | | Date Signed | Effective Date | |
| | | | | | |
| | | | 1 | 1 | |