



Direct Deposit/ Payroll Deduction

To have all or part of your paycheck deposited to your Alliance Savings or Checking Account, please fill out this form and return to your Payroll Department.

Please Check: Savings Checking

Name: _____

Social Security Number: _____ Account Number: _____

Pay Period (check one): Weekly (every week) Bi-Weekly (every 2 weeks) Semi-Monthly (twice a month) Monthly (every month)

Amount Per Pay Period (enter "all" if entire check): \$ _____

Please Check: Savings Checking

Name: _____

Social Security Number: _____ Account Number: _____

Pay Period (check one): Weekly (every week) Bi-Weekly (every 2 weeks) Semi-Monthly (twice a month) Monthly (every month)

Amount Per Pay Period (enter "all" if entire check): \$ _____

Employer Name: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Signature: _____ Date: _____

Routing & Transit Number: 321176804 (ACH)