



EMPLOYEE NAME: \_\_\_\_\_

EMPLOYEE ID: \_\_\_\_\_

EMPLOYEE ADDRESS: \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_

**Section 1 is Full Payroll Check Deposit**

**Section 1. Net Pay Direct Deposit**      Weekly       Bi-Monthly       Monthly       Cancel

Account Type (select one) -      Checking       Savings

Bank Name: **UPS Employees Federal Credit Union**

Address: **3110-A Inland Empire Blvd.**

City: **Ontario**

State: **CA**      Zip: **91764**

**Transit Number**

3	2	2	0	7	8	8	3	3
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**Account Number**

0	0																		
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**Section 2 is Partial Payroll Check Deposit**

**Section 2. Partial Payroll Deduction**      Weekly       Bi-Monthly       Monthly       Cancel

Account Type (select one) -      Checking       Savings

Bank Name: **UPS Employees Federal Credit Union**

Address: **3110-A Inland Empire Blvd.**

City: **Ontario**

State: **CA**      Zip: **91764**

**Transit Number**

3	2	2	0	7	8	8	3	3
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**Account Number**

0	0																		
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**Amount \$** \_\_\_\_\_

(Choose the dollar amount to be deducted from each payroll.)

**Section 3. Authorization**

I authorize United Parcel Service, Inc. to initiate credit entries and correcting debit entries, if necessary, to the bank account noted above. This authority is to remain in full force until United Parcel Service, Inc. has received written notification from me of its termination. Written termination shall be received in such time as to afford United Parcel Service, Inc. and the bank a reasonable opportunity to act on it.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**NOTE: When changing your Direct Deposit from one account to another, there will be a time delay in the transfer of account information. During this time period the employee will receive an actual paycheck. This check must be deposited or cashed by the employee. Direct Deposit funds are available at the Credit Union on Thursday.**

Note: The bank selected to receive the direct deposit must be a member of the National Automated Clearing House Association (NACHA).