

P.O. BOX 3398, BATON ROUGE, LA 70821-3398 • PHONE: 800-522-2748 or 225-342-5055 • FAX: 800-297-2717 or 225-342-9135

**MEMBER**-This form instructs La Cap to deposit your incoming pay to a primary account (Savings or Checking), then deposit the dollar amounts you indicate here to your other La Cap accounts. This authorization will remain in effect until changed by you in writing.

PLEASE PRINT

Name \_\_\_\_\_ Member # \_\_\_\_\_

Mailing Address \_\_\_\_\_

Street or P.O. Box

City, State, Zip

Home Phone (\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_ Soc. Sec. # \_\_\_\_\_

Employer (If retired, previous employer) \_\_\_\_\_ Email \_\_\_\_\_



#### To my Payroll Supervisor This is a (check one):

**NEW DEDUCTION** This form must accompany a membership application unless you are already a La Cap member. I hereby authorize you to deduct, for La Cap, a **TOTAL OF \$ \_\_\_\_\_** from each paycheck, as soon as possible.

**CHANGE IN PRESENT DEDUCTION**  
I hereby cancel any prior La Cap Payroll Deduction and authorize you to begin deducting, for La Cap, a **TOTAL OF \$ \_\_\_\_\_** from each paycheck as soon as possible.

**DIRECT DEPOSIT**  
Account Number: \_\_\_\_\_ Account Type (Select one):  Checking  Savings  
La Cap's Routing Number: 265473582 **Remember to include a voided check from your account to your Payroll Supervisor.**



#### Primary Account for incoming deposit

Please distribute my funds being sent to La Cap as follows: *(Please indicate dollar amount and two-digit account # if applicable)*

#### My Accounts

\$ \_\_\_\_\_ Regular Savings Acct. # \_\_\_\_\_  
\$ \_\_\_\_\_ Special Savings Acct. # \_\_\_\_\_  
\$ \_\_\_\_\_ Christmas Club Acct. # \_\_\_\_\_  
\$ \_\_\_\_\_ IRA Acct. # \_\_\_\_\_  
\$ \_\_\_\_\_ Checking Acct. # \_\_\_\_\_

#### Other Accounts

Member name \_\_\_\_\_  
\$ \_\_\_\_\_ Member # \_\_\_\_\_  
Member name \_\_\_\_\_  
\$ \_\_\_\_\_ Member # \_\_\_\_\_

#### Loans

\$ \_\_\_\_\_ Loan Payment / Acct. # \_\_\_\_\_  
\$ \_\_\_\_\_ Loan Payment / Acct. # \_\_\_\_\_

#### Other Requests

Other \_\_\_\_\_

I understand these instructions will remain in effect until changed or cancelled by me.

Signature (X) \_\_\_\_\_ Date \_\_\_\_\_

#### For La Cap use Only

Received by (Teller #) \_\_\_\_\_ Branch \_\_\_\_\_ Date \_\_\_\_\_

Effective with payday of \_\_\_\_\_ Payroll Group # \_\_\_\_\_

Keyed by (Teller #) \_\_\_\_\_ Date \_\_\_\_\_