Cambridge Municipal Employees Federal Credit Union



Employee Deduction Form

Please Print Clearly and Return to Cambridge Municipal Employees Federal Credit Union Send to Cambridge City Hall (contact info below) or info@cambridgefcu.com

Name:				
Last		First	M	
Department:				
Telephone Number:			SSN Last 4 Digits	
		Amount		
Share/Savings/Loan	\$			
Holiday Club	\$			
Vacation Club	\$			
Total Payroll Deduction:	\$			
I authorize the above deduction to be paid to the Treasurer of the Cambridge Municipal Employees Federal Credit Union (CMEFCU) and agree that no changes can be made without the approval of the CMEFCU Treasurer.				
Employee Signature:			Date:	
Credit Union Signature:			Date:	
Credit Union Use Only:			Payroll Code	

795 Massachusetts Avenue, City Hall, Ground Level, Cambridge, Massachusetts 02139 Telephone: 617-547-1900 Fax: 617-547-7969 e-mail: info@cambridgefcu.com