



# Business Affiliate Data Sheet

## General Information

Company/Organization Name: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Briefly describe your business/organization: \_\_\_\_\_

\_\_\_\_\_

Sr. Mgmt Person & Title: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

Credit Union Liaison & Title: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

## Employee

Number of Employees/Affiliates: \_\_\_\_\_ % Seasonal: \_\_\_\_\_

If you have employees in more than one location, please list below:

City	State	# of employees	Facility name
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

## Payroll Information

Payroll Manager or Contact: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Payroll Frequency: Weekly  Bi-Weekly  Semi-Monthly  Monthly

Pay Period Ending Day: \_\_\_\_\_

Pay Day: \_\_\_\_\_

Approximate day you would send ACH or mail payroll list and check: \_\_\_\_\_

\_\_\_\_\_ Day(s) Before Pay Day \_\_\_\_\_ On Pay Day \_\_\_\_\_ Day(s) After Pay Day

## Signatures

(COMPANY/ORGANIZATION NAME): \_\_\_\_\_

agrees to work with Riverfront Federal Credit Union to provide credit union membership as a benefit. Further, we confirm that our company/organization has been in existence at least one year.

Company/Organization Representative please sign here:

Approved by: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

RFCU Representative must sign here:

Approved by: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

For clarification on any information contained in this packet, or answers to any questions on the this application, please contact Riverfront's Marketing Assistant at (610) 374-8351, ext. 145.