

EMPLOYEE PAYROLL DEDUCTION AUTHORIZATION

(Retail Contracts Only - Leases NOT Eligible)

EMPLOYEE INSTRUCTIONS

Complete, sign and date the form below. If you need assistance in completing this form, please contact the Customer Service Center at 1-800-727-7000. If new account, dealer will forward form to Ford Credit with contract. If existing account, fax form to Ford Business Center at 1-866-307-4595.

Employee's Name - Print (As Appears on Pay Stub)			Social Security Number	
Last Name	First Name	Middle Initial	-	-

ENROLLMENT

Payroll Location (Company)	Recurring Pay Frequency	Enrollment Status
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<input type="checkbox"/> Ford Motor Company	<input type="checkbox"/> Weekly Hourly	<input type="checkbox"/>
<input type="checkbox"/> Ford Credit	<input type="checkbox"/> Semi-Monthly Salary	<input type="checkbox"/>
	<input type="checkbox"/> Monthly Management	<input type="checkbox"/>

I elect to have payments on the vehicle contract(s) described below made by deductions from my pay. I authorize Company to start recurring payroll deductions at the frequency indicated above and to furnish information to the Ford Credit account servicer that is necessary to accomplish the processing of the payroll deductions for each contract authorized below. The amount of the recurring payroll deduction will be the total annual payment obligation divided by the number of applicable pay periods, however, in the event my paycheck amount is less than the contract amount, I authorize Company to deduct my paycheck amount. In the event my enrollment status changes or does not align to my selected recurring payment frequency, I authorize Company to make changes to my recurring payment frequency to align with my paycheck frequency. I acknowledge and agree that the Company will extend (defer) the due date of the first payment(s) due under the contract(s) listed below to allow sufficient time to process my payroll deduction request. A one payment extension will be processed. This payment extension will move the due date of my first payment forward in time by two payments for a total of 28 days if my contracts are bi-weekly or one month if monthly. I understand that my unpaid amount financed (principal balance) will not reduce as rapidly as it would have under my original payment schedule. This may result in more finance charges over the term of my contract and potentially having a larger last scheduled payment due than originally disclosed on my contract. Payments are first applied to earned and unpaid finance charges and the remaining to other amounts I owe. This extension does not extend coverage of any insurance products, service contracts or other ancillary products. I understand that if payroll deductions do not satisfy my monthly payment due for any reason, timely payment of the amounts due are required under the terms of my contract(s). I may cancel my payroll deduction(s) at any time by going to Life@Ford, search 'Payroll Deduction' to download the form titled "Vehicle Payment Employee Payroll Deduction Authorization" (KA-17196), complete the cancellation section, and follow steps as outlined to submit the cancellation form.

Print Customer Account Number(s) or VIN Number


Employee Signature

Date Signed

CANCELLATION

Indicate the account(s) you wish to cancel below.  
Note: Your payroll deduction automatically cancels when an account is paid in full.

Print Customer Account Number(s) or VIN Number


\_\_\_\_\_  
Employee Signature

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

DISTRIBUTION: Original --> Ford Credit  
Copy --> Employee