### Making the switch to better banking today!

You can make the move to Advantage Financial FCU in three easy steps. Everything you'll need is provided in this handy Switch Kit. We can't wait to welcome you to Advantage Financial, where you'll enjoy a better experience for all your banking needs!

#### Open your new account.

Apply online in minutes or visit your local branch to open your new Advantage Financial account(s).

2

Switch your direct deposits and automatic withdrawals.

If you have any automatic transactions, use the provided forms to seamlessly switch them to Advantage Financial.

3

#### Close your old account.

Now you're ready to switch. Simply fill out the provided form to close your old account. Any remaining account balance will be transferred to Advantage Financial.







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# **Direct Deposit Authorization**

You can use your keyboard to fill out this form online, or you can print the form and complete it by hand.

Use this form to authorize your employer, retirement and pension funds, or any other agency to deposit your payment directly into your Advantage Financial account. Use one form for each direct deposit.

Notification of Direct Deposit Authorization Change					
Company or Employer:					
Address:					
City, State, Zip:					
Phone Number:					
Employee ID: (if applicable)					
Effective immediately, ple	ase deposit the net	amount of my c	heck to m	y Advantage Financial	
account. I authorize (nam	e of depositor)				
to automatically deposit f	unds into the accou	nt below. This au	uthorizatio	on shall remain in	
place until I have submitte	ed a new authorizati	on, or until this	authorizat	ion is changed or	
revoked by me in writing.					
Place an X next to your des	ired option.				
Net amount	to Advantage Finan	cial CHECKING			
Account #		R	outing#	254075470	
Net amount	to Advantage Finan	cial SAVINGS			
Account #			outing#	254075470	
Signature:			[	Date:	
Name:					
Address:					
City, State, Zip:					
Phone Number:					

#### **Direct Deposit Checklist:**

Use this list to remember all your direct deposits you need to transfer. These are the most common direct deposits.

Invest	tment

П	atiraman	L DI

\_\_\_\_ Social Security







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### **Automatic Withdrawal Authorization**

You can use your keyboard to fill out this form online, or you can print the form and complete it by hand.

Use this form to authorize a change to any automatic payment, deductions, or withdrawals from your account. Use one form for each automatic withdrawal. Or, many companies and agencies make it easy to change your account on record online on their website.

Notification of W	/ithdrawal Autho	orization Chan	ge
Name of Company:			
Account Number:			
Payment Amount:			
Address:			
City, State, Zip:			
Phone Number:			
Please cancel all automa	atic withdrawals from <b>m</b> y	y old institution:	
Financial Institution:			
Account #		Bank Routing #	
Please make all future a	utomatic withdrawals fro	om <b>my new institutio</b>	n:
Financial Institution:	Advantage Financial		
Account #		Bank Routing #	254075470
This authorization will remayou have been notified by			
Signature:		1	Date:
Name:			
Address:			
City, State, Zip:			

## Automatic Withdrawal Checklist:

Use this list to remember all your automatic payments you need to transfer. These are some of the most commonly used automatic payments.

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\_\_\_\_ Insurance

\_\_\_\_ Cable/Internet

\_\_\_\_ Gym/Club Memberships

\_\_\_\_ Credit Cards

\_\_\_\_ Investments

\_\_ Subscriptions

\_\_\_ Charity Donations





### **Account Closure Authorization**

Page 4 of 4

You can authorize your remaining balance to be deposited automatically to your new Advantage Financial account(s) or paid by a check forwarded to your mailing address.

Use this form to close your account(s) at your former financial institution. Be sure to verify any outstanding items have cleared your old account.

Notification of A	ccount Closure	Authorization	
To Whom It May Concerr	n:		
Financial Institution:			
Address:			
City, State, Zip:			
Please close my account	:		
Account Number:		Primary Owner:	
Address:			
City, State, Zip:			
Account #		Routing #	
Primary Signature:			Date:
Joint Signature:			
Name:			
Address:			
City, State, Zip:			
Phone Number:			

#### **Congratulations!**

You had to sign your name a few times...but submitting these forms completes your switch to a truly better banking experience. We can't wait to show you the difference a local partner makes.

Welcome to Advantage Financial!



