



SWITCH KIT: GETTING STARTED

Making the switch to better banking today!

You can make the move to Centric Federal Credit Union in three easy steps. Everything you'll need is provided in this handy Switch Kit. Please complete these forms, print and deliver to the respective parties. We can't wait to welcome you to Centric, where you'll enjoy a better experience for all your banking needs!

Open your new account.

Apply online in minutes or visit your local center to open your new Centric account(s).

Switch your direct deposits and automatic withdrawals. If you have any automatic transactions, use the provided forms to seamlessly switch them to Centric.

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 Centric.

PO Box 2456. West Monroe, LA 71294















SWITCH KIT:

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 Wit	hdrawal Authorization Chan	ge
Name of Company:		
Account Number:		
Payment Amount:		
Address:		
City, State, Zip:		
Phone Number:		
Please change my autom Financial Institution:	atic withdrawal from the following accor	unt:
Account #	Bank Routing #	
Please make all future aut	omatic withdrawals from the following a	ccount:
Financial Institution:		
Account #	Bank Routing # 1111	193550
	authorization will remain in effect until I have r until you have been notified by me in writing ged or revoked.	
Signature:		
Name:		
Address:		
City, State, Zip:		
Phone Number:		

ıtomatic thdrawal ecklist

this list to remember ne automatic ments you need to sfer. These are some ne most commonly d automatic ments.

- Home Mortgage
- Auto Loans
- Insurance
- Cable/Internet
 - Gvm/Club
 - Memberships
- Credit Cards
 - Investments
 - Subscriptions
 - **Charity Donations**

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SWITCH KIT:

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 Centric 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, please deposit the net amount of my check to my Centric account. I authorize (name of depositor) to automatically deposit funds into the account below. This authorization shall remain in place until I have submitted a new authorization, or until this authorization is changed or revoked by me in writing.				
Place an "X" next to your desired	option.			
Net amount to Centric CHECK Account #	Routing # 111193550			
Net amount to Centric SAVIN Account #	GS Routing # 111193550			
Net amount to Centric OTHER Account #	Routing # 111193550			
Signature:				
Name:				
Address:				
City, State, Zip:				
Phone Number:				

Direct Deposit Checklist

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

_ Payroll

Investments

Retirement Plans

Social Security

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SWITCH KIT: Account Authorization

You can authorize your remaining balance to be deposited automatically to your new Centric 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 Account Closure Authorization		
To Whom it May Concern:		
Financial Institution:		
Address:		
City, State, Zip:		
Please close my account:		
Account Number:		
Primary Owner:		
Address:		
City, State, Zip:		
Please send the remaining balance to: Place an "X" next to your desired option.		
Please deposit directly to my new account at Centric.		
Account # Routing # 111193550		
Please forward me a check to my address listed below.		
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 Centric FCU!

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