

### The Switch is Easy

#### Just follow these four simple steps:

Relax! Route 31 Credit Union makes switching your accounts easy. We have a simple checklist to guide you through the process and we will provide a Member Experience Expert to walk you through it every step of the way.

## 1 Open Your Account

Open your new account with Route 31 Credit Union. You can do this online or by visiting either Route 31 Credit Union branch in person. You will need valid identification; for complete list reach out to a Member Experience Expert. Credit Union accepts driver's license, state ID, military ID, passport, or tribal ID. All accounts require their social security number. Youth accounts also require their social security card.

## 2 Change Direct Deposit

If you currently have your payroll being directly deposited into another financial institution, inform your employer's payroll department to update your account information. Use the Direct Deposit Authorization Form. To change Social Security deposits, visit: www.ssa.gov/deposit/howtosign.htm or call 1-800-772-1213.

## 3 Update Your Payments

Move automatic payments or withdrawals (loans, bills, etc.) to your new Route 31 CU account. We have an automatic payment checklist and worksheet to help make this easy. Our Member Experience Expert will be happy to help you with this.

#### 4 Close Old Account

Once you are sure automatic withdrawals and checks have cleared your old accounts, you can fill out the Request to Close Account form and we will send it to your old financial institution letting them know where to send the final balance. We would be happy to shred your old checks for you.



#### Direct Deposit Authorization Form

Please complete this form and send or take it to the payroll department of your employer (your employer might have a separate form, but you can use the information on this form). If you receive direct deposits from other organizations (i.e. Social Security, Military, Pension, etc.) that you would like to move to Route 31 Credit Union, you should mail completed copies of this form to them as well.

| the Route 31 Credit Union account listed    | below. I would also  |          | r periodic automatic credit deposited into iscontinue any other direct deposits that I                                 |  |
|---|----------------------|----------|--|--|
| currently have established with other fin   | ancial institutions. |          |  |  |
| Name of Depositor (your name):              |                      |          |  |  |
| Address:                                    |                      |          |  |  |
| City:                                       | State                | e:       | Zip Code:  |  |
| Please make this change effective: _        |                      |          |  |  |
|   | Month / Day / Year   |          |  |  |
| Deposit Instructions:                       |                      |          |  |  |
| Route 31 Credit Union                       |                      |          |  |  |
| 715 Terrace Street, Suite 101               |                      |          |  |  |
| Muskegon, MI 49440                          |                      |          |  |  |
| (231) 726-4871                              |                      |          |  |  |
| Routing # 272483170                         |                      |          |  |  |
| Checking Account # including 3-digit suffix | Full Amount          | or       | Specific Amount \$   |  |
| Savings Account # including 3-digit suffix  | Full Amount          | or       | Specific Amount \$   |  |
| Other Account # including 3-digit suffix    | Full Amount          | or       | Specific Amount \$   |  |
| I Authorize:                                |                      |          |  |  |
| other periodic automatic credit into        | the Route 31 CU ac   | ccount a | med above to deposit my paycheck or<br>bove, and to discontinue any other di-<br>main in effect until changed by me in |  |
|   |                      |          | <br>Date   |  |



## Payment/Deposit Checklist

This checklist is a tool to help you ensure that all current automatic or online bill payments will now be drawn from your new account with Route 31 CU, not your old account. You may have other payments not on this list; this is just a list of the most common automatic payments. We encourage you to review your last three bank statements to see all automatic payments that need to be switched over. Route 31 offers online bill payment which allows you to control when payments are made giving you peace of mind and added convenience.

| Mortgage/Rent                        |
|--------------------------------------|
| Phone Service Provider (Home & Cell) |
| Gas (Natural or Propane)             |
| Electricity                          |
| Water                                |
| Sewer                                |
| Trash/Recycle Collection             |
| Internet                             |
| Cable/Satellite                      |
| Streaming                            |
| Subscriptions                        |
| Credit Cards                         |
| Home/Car/Life Insurance              |
| Loans                                |
| Investments                          |
| Health Clubs                         |
| Charities                            |
| Social Security                      |
| Direct Deposit                       |
| Other                                |

To change your automatic payments to pull from your Route 31 Credit Union account, each of these companies will need to be contacted individually or changed online. A Route 31 CU Member Experience Expert will be happy to assist you with this. These companies may ask for your account number, Route 31's routing number (272483170) and other information to verify that you have access to this account.

We're here to make this transition as easy as possible for you! Please call us with any questions or concerns at 1-231-726-4871.



#### **Payment Worksheet**

Stay organized as you update your checking account information with various companies! Use this worksheet to track which automatic or bill payments have been transferred. You can print as many copies as you need.

| Payee Name:   |                           |
|---|---------------------------|
| Address:  | Completed                 |
|   |                           |
| Phone:  | First payment made to new |
| Account Number:   | account on:               |
| Payment Made Via: Debit to Checking Debit Card Credit Card Bill Pay |                           |
|   |                           |
| Payee Name:   |                           |
| Address:  | Completed                 |
| Phone:  | First payment made to new |
| Account Number:   | account on:               |
| Payment Made Via: Debit to Checking Debit Card Credit Card Bill Pay |                           |
|   |                           |
| Payee Name:   |                           |
| Address:  | Completed                 |
| Phone:  | First payment made to new |
| Account Number:   | account on:               |
| Payment Made Via: Debit to Checking Debit Card Credit Card Bill Pay |                           |
|   |                           |
| Payee Name:   |                           |
| Address:  | Completed                 |
| Phone:  | First payment made to new |
| Account Number:   | account on:               |
| Payment Made Via: Debit to Checking Debit Card Credit Card Bill Pay |                           |



# Automatic Payment Change Form

Complete this form for any company/organization (payee) that is paid automatically from your previous account or to set up a new payment with Route 31, and mail it to that payee (check with payee to verify they will accept this form). To expedite this process, you may wish to call the organization directly or visit their website to change this information or for any specific instructions or requirements. Complete one form for each automatic payment. Please allow sufficient time for your first payment to be activated with your new Route 31 Credit Union account.

| To (Payee or organization):  |               |        |  |
|--|---------------|--------|--|
| Payee Account Number:  |               |        |  |
| Name of Depositor (your name):   |               |        |  |
| Address:   |               |        |  |
| City:  | Stat          | te:    | Zip Code:  |
| Phone:   |               |        |  |
| Payment Change I request Automatic from the following actions:           | -             | withdr | rawn   |
| Route 31 Credit Union  |               |        |  |
| 715 Terrace Street, Suite 101  |               |        |  |
| Muskegon, MI 49440   |               |        |  |
| (231) 726-4871   |               |        |  |
| Routing # 272483170  |               |        |  |
| Checking Account # including 3-digit suffix                              | Full Amount 🗖 | or     | Specific Amount \$   |
| Savings Account # including 3-digit suffix                               | Full Amount   | or     | Specific Amount \$   |
| Please make this change effective: _                                     |               |        |  |
|  |               | Mon    | th / Day / Year  |
| I Authorize:   |               |        |  |
| Effective on the date specified above Account Number listed above should |               |        | s debited on my behalf for the Payee<br>31 Credit Union account specified. |
|  |               |        | Date   |



# Request to Close Account Form

Present this form to the financial institution with whom you will be closing your account or we can send it on your behalf. Be sure to leave sufficient funds in your current account long enough for final automatic payments, outstanding checks, and debit transactions to clear.

| Close Account I request to close the fo   | ollowing acco      | ount:  |                               |          |
|---|--------------------|--------|-------------------------------|----------|
| Financial Institution Name:   |                    |        |                               |          |
| Account Number:   |                    |        |                               |          |
| Name (your name):   |                    |        |                               |          |
| Address:  |                    |        |                               |          |
| City:   | State:             | Z      | ip Code:                      |          |
| Phone:  |                    |        |                               |          |
| I am requesting the closure of my acc<br>Route 31 Credit Union account at the a | ddress listed belo | ow:    | -                             | ds to my |
| Please make this change effective:  |                    |        | h / Day / Year                |          |
| Route 31 Credit Union   | s to the follo     | wing a | ccount:                       |          |
| 715 Terrace Street, Suite 101<br>Muskegon, MI 49440                             |                    |        |                               |          |
| (231) 726-4871  |                    |        |                               |          |
| Routing # 272483170   |                    |        |                               |          |
| Checking Account # including 3-digit suffix                                     | Full Amount        | or     | Specific Amount \$            |          |
| Savings Account # including 3-digit suffix                                      | Full Amount        | or     | Specific Amount \$            |          |
| I Authorize:  |                    |        |                               |          |
| Effective on the date specified above, funds transferred to my account at Ro    |                    |        | isted at the top to be closed | and the  |
| Signature   |                    |        | Date                          |          |