

How to Use the Account Switch Kit

Switching your accounts from another financial institution has gotten a whole lot easier! The Account Switch Kit was developed to help new members make a smooth transition to Sun Federal's products and services.

Open Up Your New Accounts

First, open your Sun Federal Credit Union savings account. The minimum opening balance is \$5. Once this account is opened you will have access to our no-fee checking, certificates, loans, online account access and more! Visit www.sunfederalcu.org for a comprehensive list of services available. Your immediate family members are also eligible to join!

<u>Close Down</u> Your Old Accounts

Make sure you leave your old account active long enough to allow outstanding checks and automatic withdrawals to clear. Once you're confident that the old accounts are inactive, simply fill-out the Close Down form and mail or present it to your previous financial institution. Don't forget to destroy unused old checks, debit cards, etc.

Switch Over Your Automatic Transactions

Change Payroll Direct Deposit – provide this form to anyone who makes direct deposits to your account. This includes:

- Your employer's human resource or payroll department (they may have their own form for your use)
- Your retirement or pension payment provider
- Social Security Administration

Change Automatic Withdrawals – provide this form (ask if you need to use a form from the company that makes the automatic withdrawal) to anyone who makes automatic withdrawals from your account:

- Mortgage company
- Insurance company
- Loans
- Utility bills

Close Account			
Date			
Financial Institution Name			
Address			
City	State	<u>j</u>	Zip
To Whom It May Concern: Please close my account (account number), and send a check for the remaining balance to me at the address listed below. If you have any questions about this request, please contact me during the Day or Evening (select one) at (phone number). Thank you. Sincerely,			
Signature		Co-Signer Signature	
Name (print)		Co-Signer Name (print)	
Address			
City	State		Zip

Change Payroll Direct Deposit

0			
Date			
Employer/Depositor's Name			
Address			
City	State		Zip
To Whom It May Concern:			
You are currently depositing 🗌 My Entire Paycheck 🗌 Part of My Paycheck (select one) to this account:			
Former Financial Institution			
Bank Routing Number			
Account Number			
Please stop making deposits to that account a	nd instead ma	ke them to:	
Sun Federal Credit Union			
Routing number: 241282412			
Account Number Select One: Checking Savings			hecking 🗌 Savings
If you have any questions about this request, please contact me during the 🗌 Day 🗌 Evening (select one) at			
(phone number). Thank you.			
Sincerely,			
Signature			
Name (print)			
Address			
City	State		Zip

Give this letter to your employer.

Change Automatic Withdrawal

0			
Date			
Name of Company That Makes Automatic Withdrawal			
Address			
City	State Zip		
To Whom It May Concern:			
You are currently withdrawing \$ (amour	nt) for my (what payment is	for),	
(account or other identifying number),	(when) from the following a	ccount:	
Former Financial Institution			
Bank Routing Number			
Account Number			
Please STOP taking withdrawals from that account and instead take them from:			
Sun Federal Credit Union			
Routing number: 241282412			
Account Number Automatic withdrawals can only be made from checking.			
If you have any questions about this request, p	please contact me during the 🗌 D	ay 🗌 Evening (select one) at	
(phone number). Thank you.			
Sincerely,			
Signature			
Name (print)			
Address			
City	State	Zip	

Send this letter to the company that makes the automatic withdrawal.

Change Automatic Deposit

Date		
Name of Company That Makes Automatic Dep	osit	
Address		
City	State	Zip
To Whom It May Concern:		
You are currently depositing \$ (amount) for my (what deposit is for), (account or other identifying		
number), (when) to the following accou	nt:	
Former Financial Institution		
Bank Routing Number		
Account Number		
Please stop making deposits into that account	and instead put them into:	
Sun Federal Credit Union		
Routing number: 2412-8241-2		
Account Number		
If you have any questions about this request, p	please contact me during the 🗌 D	ay 🗌 Evening (select one) at
(phone number). Thank you.		
Sincerely,		
Signature		
Name (print)		
Address		
City	State	Zip

Send this letter to the company that makes the automatic deposit.

Transfer Authorization Form						
(All amount change requests to direct deposit must go through your employer's payroll department.)						
Date	Date					
Select One:	New Request Request to Modify Existing Transfer Cancel Transfer				Cancel Transfer	
Member Name	Member Name					
Member Account to	Transfer From:					
I authorize Sun Fede	eral Credit Union t	o transfe	r funds from my a	ccount as dire	cted belov	v:
Date to Start Transf	er					
Frequency:	Monthly	Semi	-Monthly	🗌 Bi-\	Neekly	Weekly
Amount (\$)	Account (to transfer to)		Suffix	Share		Loan
I understand it is my responsibility to maintain a balance in my account to enable the transfer(s) to be made. The						
transfer(s) will continue until I notify Sun Federal Credit Union in writing to cancel or update the transfer or if Sun						
Federal Credit Union notifies me the transfer will be discontinued. Deductions will stop automatically when the loan(s)						
is paid off. The funds will then remain in the net account my payroll deposits into.						
Signature						
Name (print)						
Address						
City		9	State		Zip	

Give this form to your branch manager or loan officer.

Office Use Only:	T-transfer K-transfer	Transfer Group
Date Processed:	Processed By:	