



MAKE THE SWITCH IN 1-2-3

Ready to start? Contact our team to help you get started at 414.486.4500 or 800.835.9680.

<p>Step 1:</p> <p>OPEN</p> <p>Open your membership and checking with PFCU.</p> 	<p>What You'll Need:</p> <ul style="list-style-type: none"> • Two forms of valid ID such as: Driver License, Employer Photo ID, School Photo ID, Military ID, State ID, or a signed major credit card (as second ID only) • Do you work for a Select Employer Group (SEG)? Swap one form of ID for proof of employment (pay stub, letter from the employer) • Proof of Address such as a current utility or phone bill. <p>Check List:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Contact PFCU or visit a branch to apply <input type="checkbox"/> Lunch break? Call ahead for an appointment!
<p>Step 2:</p> <p>TRANSFER</p> <p>Transfer automatic deposits and withdrawals to your new PFCU account.</p> 	<p>What You'll Need:</p> <ul style="list-style-type: none"> • New PFCU account and routing numbers • Old account and routing numbers • List of automatic deposits and withdrawals (bill payments) • PFCU Direct Deposit form • Payment Authorization Letter from PFCU to provide your creditors <p>Check List:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Provide your Direct Deposit form to your employer (SEGs may have different forms, see a Member Service Rep!) <input type="checkbox"/> Provide other depositors with new account info (payroll, retirement, pension, military, child support, etc.) <input type="checkbox"/> Update account info at Social Security Administration (SSA) at 800.772.1213 or ssa.gov <input type="checkbox"/> Contact payees with new account info, OR provide Payment Authorization Letter
<p>Step 3:</p> <p>CLOSE</p> <p>Close your old account.</p>	<p>What You'll Need:</p> <ul style="list-style-type: none"> • Close Account Request Letter <p>Check List:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Verify all pending purchases, outstanding checks, and automatic withdrawals from your old account <input type="checkbox"/> Request the remaining balance from the old account <input type="checkbox"/> Submit the Close Account Request letter to your old bank or credit union <input type="checkbox"/> Destroy leftover checks and debit cards



Direct Deposit Request

To Whom It May Concern:

I, _____, am requesting my employer to directly deposit my payroll into my account at:

**Prime Financial Credit Union
5656 South Packard Avenue
Cudahy, WI 53110**

Routing/Transit Number: 275080282

PFCU Account #: _____

PFCU Account Type:

Checking

Savings

X

Member Signature

Date

Member Name (printed)

If you have any questions, please feel free to call our Member Support Center at 414.486.4500.



Automatic Payment Authorization Request

To Whom It May Concern:

This letter is to request a change of my current payment arrangements with you. My former and current financial information is provided. Please make these changes accordingly.

Originating Company Name:

(receiving payments)

Address: _____ **City, State, Zip:** _____

Account Number: _____ **Contact Number:** _____

FORMER Financial Institution	CANCEL DATE: _____
	Name of Institution: _____
	Street: _____
	City/State/Zip: _____
	Routing Number: _____
	Account Number: _____

CURRENT Financial Institution	Name of Institution: Prime Financial Credit Union
	Street: 5656 South Packard Avenue
	City/State/Zip: Cudahy, WI 53110
	EFFECTIVE DATE: _____
	Routing Number: 275080282
	Account Number: _____
	<input type="checkbox"/> Checking <input type="checkbox"/> Savings
	Amount: \$ _____
Frequency: <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Other: _____	

X _____

Signature

Date

Name (printed)

If you have any questions regarding this request, please contact me via:

Mail: Street: _____
 City/State/Zip: _____
 Phone: () _____ Email: _____

