

Come Grow With Us!

We're glad that you are joining TRU-FI. By filling out this easy-to-use Switch Kit, we're sure you'll find it is easier than you might have ever imagined to make the change from your old financial institution to TRU-FI Credit Union. Welcome to our credit union family.

Hometown banking with people you trust



Authorization to close account *Please complete and sign to let TRU-FI Credit Union close your account.*

Previous Financial Institution	Address		
Phone	City	State	Zip
This form gives you the authorization to close the account number:	and forward the balance to us at the address provided below. Please make the check payable to TRU-FI Credit Union for the benefit of (Name):		
Signature			Date
Joint Signature			Date

Your prompt attention to this request is appreciated. Thank you.

Please send check to: TRU-FI Credit Union, 602 South 6th St., Macclenny, FL 32063 (904.259.6702)

Authorization to switch direct deposit *I authorize...*

Company Name	Address		
Phone	City	State	Zip

...to accept this signed form to direct my payment/credit to my TRU-FI checking/savings account. I understand that it may take up to 30 days to process this request.

Signature	Date
Joint Signature	Date

TRU-FI ACH Routing/Transit Number: **263179914**

Account #	Distribution
1. Savings Amount:	2. Checking Amount:

Automatic payment change notification

Consult the Automatic Payment Checklist to determine which companies you need to notify that you have switched your checking account to TRU-FI. After notification, these companies should establish automatic payments from your new checking account. If you have any questions, please contact TRU-FI Credit Union.

Automatic Payment Checklist:

<input type="checkbox"/> Mortgage	<input type="checkbox"/> Telephone	<input type="checkbox"/> Internet	<input type="checkbox"/> Investments	<input type="checkbox"/> Cable	<input type="checkbox"/> Cell Phone
<input type="checkbox"/> Insurance	<input type="checkbox"/> Charities	<input type="checkbox"/> Health Clubs	<input type="checkbox"/> Loans	<input type="checkbox"/> Credit Cards	<input type="checkbox"/> Electricity
<input type="checkbox"/> Other					

Account access services

<input type="checkbox"/> Order a Visa® Debit Card for me and my joint account holder. (Debit Cards are subject to approval.)	<input type="checkbox"/> Order my first box of checks with the following information:	<input type="checkbox"/> Phone number included on checks		
<input type="checkbox"/> Telephone Banking	Check # to Start	Box Quantity	Address	
<input type="checkbox"/> Mobile Banking	Name 1		City	
<input type="checkbox"/> Internet Banking	Name 2		State	Zip

Please return this form to **TRU-FI** by: fax (904.259.2666), email at loans@TruFiCU.org, or dropping it off at one of our locations.

Main Office
602 South 6th Street
Macclenny, FL 32063

Baldwin Office
100 South Lima Street
Baldwin, FL 32234

Callahan Branch
450027 Old Dixie Highway
Callahan, FL 32011

904.259.6702 | TruFiCU.org

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Insured by NCUA

