



**FEDERAL  
CREDIT UNION**

# **CHECKING ACCOUNT SWITCH KIT**

We're pleased you've decided to open an account with UPFCU. We pledge you'll always receive prompt, personal service, provided by people who know you.

Changing checking accounts can be a big decision and a real challenge. That's why your Credit Union has designed this Switch Kit to guide you step-by-step through the move.

**STEP 1: OPEN YOUR UPFCU CHECKING ACCOUNT**

**STEP 2: CHANGE DIRECT DEPOSITS**

**STEP 3: CHANGE AUTOMATIC PAYMENTS/WITHDRAWALS**

**STEP 4: CLOSE YOUR OLD CHECKING ACCOUNT**



# DIRECT DEPOSIT TRANSFER REQUEST FORM

Give this completed form to your employer/depositor for processing. If they require a voided check, please let your Member Service Representative know.

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Your Employer / Depositor Name

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Your Employer / Depositor Address

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Your Employer / Depositor City, State, Zip

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Your Employer / Depositor Telephone Number

**To Whom It May Concern:**

**You are currently electronically depositing funds to the following account:**

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Financial Institution

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Routing Transit Number

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Account Number

**Please stop depositing to the above account and begin depositing to the account listed below.**

**New Account Information:**

UP Arkansas Federal Credit Union

Routing Transit Number: 282075730

Account # \_\_\_\_\_

\_\_\_\_\_ Savings      \_\_\_\_\_ Checking

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Name (Please Print)

---

Signature

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Address

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City, State, Zip

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Phone



# AUTOMATIC PAYMENT REQUEST FORM

This form should be filled out and sent to the payee or merchant with whom you currently have automatic payments set up. Please see the checklist on the last page of this kit to make sure you have given this form to all payees. Confirm with the company that they will accept this form, you may have to change this information on their website.

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Payee or Merchant Name

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Payee or Merchant Address

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Payee or Merchant City, State, Zip

**To Whom It May Concern:**

**You are currently withdrawing \$\_\_\_\_\_ for payment of my \_\_\_\_\_  
on the \_\_\_\_\_ of each month from the account listed below:**

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Financial Institution

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Routing Transit Number

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Account Number

**Please stop withdrawing from the above account upon receiving this letter and begin to withdraw from the account listed below:**

UP Arkansas Federal Credit Union

Routing Transit Number: 282075730

Account / Member # \_\_\_\_\_

\_\_\_\_\_ Savings      \_\_\_\_\_ Checking

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Name (Please Print)

---

Signature

---

Address

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City, State, Zip

---

Phone



# CLOSE ACCOUNT FORM

Be sure to leave sufficient funds in your current account long enough for outstanding checks and automatic withdrawals or debits to clear. Once all transactions have been posted and you are ready to close the account, print and complete this form, and mail it to your current financial institution.

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Bank Name

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Address

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City, State, Zip

**To Whom It May Concern:**

**Please close my account # \_\_\_\_\_ and**

**forward the funds remaining in my account to:**

**UP Arkansas Federal Credit Union**

**PO Box 736**

**North Little Rock, AR 72115**

**Routing# 282075730**

**Account # \_\_\_\_\_**

\_\_\_\_\_ **Savings**      \_\_\_\_\_ **Checking**

**Thank you for your assistance.**

**Sincerely,**

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Name (Please Print)

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Signature

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Address

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City, State, Zip

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Date

# BILL PAY CHECKLIST

As soon as your new account is open, you can enroll online for our Free Bill Pay service. Gather your payees and copies of your bills and we can help you set this up. This is a simple checklist with common bills and payees, to help you organize your recurring payments and make this transition seamless.

- Mortgage / Rent
- Electric Company
- Gas Company
- Water Company
- Phone / Internet Bill
- Cable Service
- Car Loan
- Credit Card \_\_\_\_\_
- Credit Card \_\_\_\_\_
- Credit Card \_\_\_\_\_
- Auto Insurance
- Life / Health Insurance
- Monthly Memberships
- Charitable Donations
- Other \_\_\_\_\_
- Other \_\_\_\_\_
- Other \_\_\_\_\_