Painesville Credit Union Switch Kit

Take the hassle out of switching your checking account with our complete and easy to understand switch kit

Switch Kit
Direct Deposit Transfer Request Form
Once you have completed this form, please deliver it to your employer/depositor for processing.

Employer/Depositor

Name
Address
City, State, Zip

Telephone Number
To Whom It May Concern:

You are currently electronically depositing funds to the following account:

Financial Institution
Routing Transit Number
Account Number

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

New Account Information:

Painesville Credit Union
Financial Institution
241280935
Routing Transit Number
Account Number:

Account Type: Savings Share Draft Checking

Name (Please Print)
Signature
Address
City, St, Zip
Phone

*Remember to include a voided check with your request
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. This would include: utility companies, credit card companies, mortgage holders, etc.

Employer/Depositor

Name Address

City, State, Zip

To Whom It May Concern:

You are currently withdrawing $________ for the payment of my __________________________
on the__________________________ of each month from the account listed below:

Financial Institution

Routing Transit Number

Account Number

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

New Account Information:

Painesville Credit Union

Financial Institution

241280935

Routing Transit Number

Account Number: ______________ Account Type ______ Savings ______ Share Draft Checking

If you have any questions about this request, please feel free to contact me at:

Telephone number

Name (Please Print)

Signature

Address

City, St, zip

Phone

*Remember to include a voided check with your request
Close Account Form

Be sure to leave sufficient funds in your current account long enough for outstanding checks and automatic withdrawals 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.

__________________________
Employer/Depositor Name

__________________________
Address

__________________________
City, State, Zip

To Whom It May Concern:

Please close my account #________________ and forward the funds remaining in my account to: Painesville Credit Union, 280 North St. Clair St. Painesville Credit Union's routing number is: 241280935

My Painesville account number is________________:________________ Savings:________________ Share Draft Checking

__________________________
Name (Please Print)

__________________________
Signature

__________________________
Address

__________________________
City, St, zip

Joint Owner - if applicable (please print)

__________________________
Joint Owner Signature - if applicable

Date