



CLARENCE COMMUNITY & SCHOOLS FEDERAL CREDIT UNION

SWITCH AND SAVE PACKET

Making the Switch from your current financial institution to the Clarence Community & Schools FCU is a breeze. Follow our step-by-step, easy to follow directions to help make your move a smooth transition to the CCSFCU Family.

Step 1 > Open Your New Checking Account

Step 2 > Make the Switch and Save!

In this packet, you will find a Direct Deposit Form and an Automatic Payment Form to make the switch easier. These forms can be used to change your Direct Deposit with your employer and move any Automatic Withdrawals to your new account. Don't forget to change any payments that may use your old Debit Card. Use the Checklist (to the right) to keep track of companies or organizations you may need to contact. Please complete one form for each deposit or payment you wish to switch.

Step 3 > Close Your Old Accounts

Be sure to leave sufficient funds in your old account long enough for outstanding checks and automatic withdrawals to clear. Once all outstanding transactions have posted, complete the enclosed Account Closure Form and send it to your old financial institution. The Account Closure Form asks them to send you a check for the remaining balance in the account.

Step 4 > Enjoy your New Checking Account with Clarence Community & Schools FCU !

Take advantage of all the benefits your new checking account has to offer. Log onto www.ccsfcu.com and sign into Home Banking to view your account activity, make a transfer or request a withdrawal. You can ask a credit union representative or download a Home Banking instruction sheet on our website. Sign into Bill pay to pay your bills online! (view the online demonstration to get the most out of your bill pay service). Best of all, these services are FREE just for being a member!

Examples of Direct Deposits:

- Payroll
- Social Security Administration
- Government
- Retirement
- Investments
- Child Support or court issued payments

Examples of Automatic Payments / Debits:

- Water
- Gas
- Electric
- Cable/Internet/Satellite
- Telephone
- Cellular Phone

Other Payments:

- Mortgage
- Loans (auto, home equity)
- Credit Cards
- Insurance (life, auto, homeowners, renters)
- Health Club
- Investments and Annuities
- Charitable Donations
- Child Support or Court issued payments

Please call (716) 630-0888 if you have any questions.



CLARENCE COMMUNITY & SCHOOLS FEDERAL CREDIT UNION

Direct Deposit Change Form

Please complete and send this form to your employer or depositor that automatically deposits funds into your existing checking account electronically. *(It may take several weeks for your direct deposit to be established with the Clarence Community & Schools FCU. Check with your employer or depositor for an approximate effective date. They may also require additional information).*

Employer / Depositor's Name

To Whom It May Concern:

You currently deposit all or a part of my: Social Security / Retirement / Payroll / Other check into my
(circle one)

account with: _____
(Financial Institution)

Effective immediately, please stop depositing to the account above and begin depositing to my account with the Clarence Community & Schools Federal Credit Union listed below.

Clarence Community & Schools FCU
9145 Sheridan Drive, P.O. Box 657
Clarence, NY 14031

Routing and Transit # 222 379 069

Checking Account # 1 4 8 5 0 0 0 0 _____

If you have any questions, please call me at: () _____ (daytime) or
() _____ (evening).

X _____
Authorized Member's Signature

Date

Print Name

_____-_____-_____
Social Security #

Address

City

State

Zip Code



CLARENCE COMMUNITY & SCHOOLS FEDERAL CREDIT UNION

Automatic Withdrawal Change Form

Please complete and send this form to any company or organization that automatically withdraws funds from your existing checking account electronically. Complete one form for each automatic payment. *(It may take several weeks for your automatic payment to be established with CCSFCU. Check with the company or organization for an approximate effective date).*

Name of business that currently makes an automatic withdrawal (ex: auto loan, utility bill, etc...)

To Whom It May Concern:

You currently withdrawal funds in the amount of \$_____ from my account with

_____ to pay my _____ payment with you.
(Financial institution payment is currently coming out of) *(reason for withdrawal..auto loan, utility bill, etc..)*

Effective immediately, please stop withdrawing from the account above and begin withdrawing from my account with the Clarence Community & Schools Federal Credit Union listed below.

Clarence Community & Schools FCU
9145 Sheridan Drive, P.O. Box 657
Clarence, NY 14031

Routing and Transit # 222 379 069

Checking Account # 1 4 8 5 0 0 0 0 _____

If you have any questions, please call me at: () _____ (daytime) or
() _____ (evening).

X _____
Authorized Member's Signature

Date

Print Name

_____-_____-_____
Social Security #

Address City State Zip Code

**Please note: If you make a payment from your checking account, it is advised that you attach a voided check or deposit slip from your new Clarence Community & Schools FCU account. It is also recommended that you maintain accounts at both financial institutions until your automatic withdrawal authorization change is complete.*



CLARENCE COMMUNITY & SCHOOLS **FEDERAL CREDIT UNION**

Account Closure Form

Once all outstanding payments and transactions have cleared and your automatic deposits and payments are established with your new Clarence Community & Schools FCU account, please complete and send this form to your other financial institution to close your account(s) with them.

Financial Institution

To Whom It May Concern:

I would like to close my account with you. Please send a check for the remaining balance to me at the address listed below. The account information is as follows:

Account # _____

Type: ___ Savings ___ Checking ___ Money Market ___ Other _____

Account # _____

Type: ___ Savings ___ Checking ___ Money Market ___ Other _____

Account # _____

Type: ___ Savings ___ Checking ___ Money Market ___ Other _____

Thank you for your assistance.

X _____
Authorized Member's Signature

Date

Print Name

Phone

Address City State Zip Code

Online Bill Payment Worksheet

Use the worksheet below to track your bills being paid through the Online Bill Payment system with your current financial institution. Once you establish your account with Clarence Community & Schools FCU, this will help you to set-up your payees and payments with our Online Bill Payment..

Payee Name _____ Account # _____

Address _____

City _____ State _____ Zip _____

Payee Name _____ Account # _____

Address _____

City _____ State _____ Zip _____

Payee Name _____ Account # _____

Address _____

City _____ State _____ Zip _____

Payee Name _____ Account # _____

Address _____

City _____ State _____ Zip _____

Payee Name _____ Account # _____

Address _____

City _____ State _____ Zip _____

Payee Name _____ Account # _____

Address _____

City _____ State _____ Zip _____