



Infuze Credit Union
PO Box 80
Fort Leonard Wood, MO 65473

Thank You

Thank you for taking the time to use our Switch Kit and making Infuze Credit Union your primary financial institution. Please fill out the blank fields in the following documents to make the switch to Infuze Credit Union as simple as possible. The next page will include a checklist and some helpful tips for switching your account.

When you are finished with all of the documents, bring them to any of our locations and we will send them for FREE.

Please DO NOT write any more checks on your previous accounts and ensure that all checks written, automatic payments/deposits, and any other obligations have cleared your account before closing. Doing so will prevent your old account from being overdrawn.

Sincerely,

Infuze Credit Union Staff



Check List

Use this checklist to track each step of the switch. You may want to keep this for your personal records along with any confirmation letters received.

Previous Financial Institutions

Financial Institution	Account Number	Date Mailed	Confirmation Received

Direct Deposits and Automatic Payments

Organization or Business	Account Number	Date Mailed	Confirmation Received

Switch Your Online Bill Pay

If you used Online Bill Pay at your previous Financial Institution, don't forget to switch all of your payments from them to Infuze Credit Union. Our Online Bill Pay solution is free to members with a checking account and is easy to set up.

Don't Forget

If you have any of the following items, bring them into any of our locations and we will shred them for you at no cost: Unused Checks, Debit Cards, Credit Cards, ATM Cards, and Deposit Slips.

Do You Have Any Questions?

Call and talk to a Credit Union Representative at (800)244-6628 or visit any of our locations; we would be glad to help you.



_____ (Financial Institution Address)

Account Closure Notice

To Whom It May Concern:

Please accept this as my formal authorization and request to close my account effective immediately.

Name on Account: _____
Account Number: _____

Please transfer the remaining balance and any accrued interest electronically or by check to the following address.

Electronically

Infuze Credit Union
Routing Number: 281580679
Account Number: _____

By Check

Infuze Credit Union
PO Box 80
Fort Leonard Wood, MO 65473

Please send me written confirmation of when this has been completed. If you have any questions, please call me at

_____.

Current Address

Thank you,

Signature _____ Date _____

Printed Name _____



_____ (Business/Organization Address)

Direct Deposit Change Notice

To Whom It May Concern:

Please accept this as my formal authorization and request to change the financial institution information for direct deposit. Please make this change effective immediately.

Name on Account: _____
Account Number: _____

New Financial Institution Information:

Address

Infuze Credit Union
PO Box 80
Fort Leonard Wood, MO 65473

Account Information

Account Number: _____
Account Type: _____
Routing Number: 281580679

Please send me written confirmation of when the change will be effective. If you have any questions, please contact me at _____.

Current Address

Thank you,

Signature _____ Date _____

Printed Name _____



_____ (Business/Organization Address)

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Printed Name _____



_____ (Business/Organization Address)

Automatic Payment Change Notice

To Whom It May Concern:

Please accept this as my formal authorization and request to change the financial institution information for my automatic payment. Please make this change effective immediately.

Name on Account: _____
Account Number: _____

New Financial Institution Information:

Address

Infuze Credit Union
PO Box 80
Fort Leonard Wood, MO 65473

Account Information

Account Number: _____
Account Type: _____
Routing Number: 281580679

Please send me written confirmation of when the change will be effective. If you have any questions, please contact me at _____.

Current Address

Thank you,

Signature _____ Date _____

Printed Name _____



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