



Welcome to GNO Federal Credit Union's Online Switch Kit!

Make your transition go as smoothly as possible with this easy guide. After opening your new checking account, simply fill out the forms on the following pages, and send them to the appropriate parties. Here are the steps you will need to take:

STEP 1: SWITCH OVER YOUR DIRECT DEPOSIT

Send the attached Direct Deposit Change Form to anyone who makes automatic deposits to your account, including:

- Your employer's human resources department
- Company handling your retirement or pension payments
- Social Security Administration

STEP 2: SWITCH OVER YOUR AUTOMATIC PAYMENTS

Send the attached Automatic Payment Change Form to the companies and financial institutions which handle your automatic payments (including anyone who makes automatic charges to your old debit cards). Use this checklist to keep track of the people you may need to contact:

- Mortgage company
- Homeowner's insurance
- Auto insurance
- Life insurance
- Utility companies
- Telephone company
- Cable company
- Other

STEP 3: CLOSE DOWN YOUR OLD ACCOUNTS

Be sure to leave your old accounts active long enough to allow outstanding checks and automatic withdrawals to clear. Leave enough money in place to cover these transactions. This process may take several weeks. After your account is closed, make sure to destroy your old checks and ATM/debit cards.

Congratulations! You're done! We told you it would be easy. We hope that you take advantage of all of the great products and services we offer. Please give us a call at (504) 454-8224 if you have any questions. We'll be happy to help you with any of these forms.

STEP 1: DIRECT DEPOSIT CHANGE FORM

This form goes to your human resource or payroll office.

To Whom It May Concern:

Please redirect my direct deposit per my instructions to the financial institution indicated below:

Employee Name

Street Address

City State Zip Code

Social Security # or Employee ID

Previous Financial Institution Account #

I authorize my direct deposit to be routed to: **GNO Federal Credit Union**
3105 Lime Street
Metairie, LA 70006
Routing # 265075825

Member # _____

Checking

Savings

Employee Signature

Date

STEP 2: AUTOMATIC PAYMENT CHANGE FORM

This form goes to the company or payee.

To Whom It May Concern at _____ :
Merchant Name

Please route my automatic payment per my instructions to the financial institution below:

Name

Street Address

City State Zip

Account Number

I authorize my automatic payment to be debited: Monthly Weekly

Effective: Immediately Beginning: _____
Date

From my account at: **GNO Federal Credit Union**
3105 Lime Street
Metairie, LA 70006
Routing # 265075825

Member # _____ Checking Savings

Signature

Date

You should complete one form for every automatic payment you have debited from your account. Please make additional copies from this form as needed.

STEP 3: CHECKING ACCOUNT CLOSURE FORM

This form goes to your old financial institution.

To Whom It May Concern at _____ :
Previous Financial Institution

Please close my account as instructed here and forward the remaining balance from the account, including any interest accrued (if applicable), to the financial institution indicated below:

Name(s) on the Account

Street Address

City State Zip

Checking Account Number to be closed

I authorize the closure of my account effective as of this date: _____

Please send a check for the remaining balance to: **GNO Federal Credit Union**
3105 Lime Street
Metairie, LA 70006
Routing # 265075825

Member # _____ Checking Savings

If you have any questions about this request, please call me at: _____

Primary Account Owner's Signature

Date

Joint Account Owner's Signature

Date