



## QUICK SWITCH KIT



### Welcome to Cornerstone Community FCU!

As a new member, we hope you're already aware of the many benefits we offer you. As a special convenience, we've put together this Quick Switch Kit to make switching your checking account to Cornerstone easy and fast.



#### Step 1 – Close Old Checking Account

Just complete the enclosed Checking Account Closure Form and bring it to Cornerstone. Then, on the date you specify, your remaining balance will be transferred to your new Cornerstone account (typically a transfer takes a few business days). It's just that simple.



#### Step 2 – Direct Deposit

If you want to set up or continue Direct Deposit at work, we've provided a handy Direct Deposit Change Form. Simply fill it out and bring it to Cornerstone. We'll do the rest.

#### Step 3 – Automatic Payment

If you like to pay bills automatically, Cornerstone makes it easy. Complete the enclosed Automatic Payment Change Form and bring it to Cornerstone. The vendor will change the necessary records to deduct the appropriate payments on the dates you specify.

*That's all there is to it. If you have any questions, please call or visit any Cornerstone branch and we'll be glad to help. On behalf of all of us at Cornerstone – thanks! We look forward to serving you for many years to come!*

Just fill out this Quick Switch Kit, starting with the Applicant Information below. Then bring it to one of our convenient Cornerstone branches, along with the following: a minimum of \$5 to open your new savings account, two forms of identification (one must be photo) for proof of identity and your last statement from your previous financial institution.

### Applicant Information

Current Member    New Member

Last Name                      First Name                      Initial

Address                                      Apt. #

City                      State      Zip      How long at this address?

(      )  
Day Phone                                      Mother's Maiden Name

Employer                                      Employer Phone

Social Security Number                      Date of Birth

E-mail Address

Do you use direct deposit?                       Yes       No

Employer \_\_\_\_\_

Do you use automatic payment?                       Yes       No

- Time Warner Cable       AT&T
- National Fuel               NYSEG
- Niagara Mohawk       Verizon
- Other \_\_\_\_\_

Applicant's Signature      Date

**Main Office**  
6485 S. Transit Road  
Lockport, NY  
716-434-2290  
800-488-6481

**Lockport Office**  
55 Stevens Street  
Lockport, NY  
716-434-2290

**Middleport Office**  
5 State Street  
Middleport, NY  
716-735-7004

## Checking Account Closure Form

Cornerstone will send to your previous financial institution

*Please close my account per my instructions*

Previous Financial Institution \_\_\_\_\_

Checking Account Number to be closed \_\_\_\_\_

Name(s) on Account \_\_\_\_\_

Address \_\_\_\_\_

City                                      State                      Zip

Daytime Phone  
□ □ □ - □ □ □ - □ □ □ □

I authorize the closure of my account effective: \_\_\_\_\_

Please send a check with any remaining balance to:  
Cornerstone Community Federal Credit Union  
6485 S. Transit Road • Lockport, NY 14094

□ □ □ □ □ □ □ □ □ □  
Account Number                       Checking

Authorized Signature(s) \_\_\_\_\_

Date \_\_\_\_\_

*Please keep a copy for your records.*

## Direct Deposit Change Form

Cornerstone will send to your Human Resources / Payroll Dept.

*Please change my direct deposit per my instructions*

Previous Financial Institution \_\_\_\_\_

Checking Account Number  
to be discontinued \_\_\_\_\_

Employee's Name \_\_\_\_\_

Address \_\_\_\_\_

City                                      State                      Zip

Daytime Phone  
□ □ □ - □ □ □ - □ □ □ □

I authorize my direct deposit  
to be routed to: \_\_\_\_\_

Cornerstone Community Federal Credit Union  
6485 S. Transit Road • Lockport, NY 14094

Cornerstone Community Federal Credit Union  
Routing Number: **222381293**

□ □ □ □ □ □ □ □ □ □  
Account Number                       Checking       Savings

Authorized Signature(s) \_\_\_\_\_

Date \_\_\_\_\_

*Please keep a copy for your records.*

## Automatic Payment Change Form

Cornerstone will send to Company / Payee

*Please route this automatic payment per my instructions*

Name(s) on Account \_\_\_\_\_

Checking Account Number  
to be discontinued \_\_\_\_\_

Company Name \_\_\_\_\_

Company Address \_\_\_\_\_

City                                      State                      Zip

Payment Amount                       Weekly       Monthly

I authorize my automatic payment to be debited  
from my Cornerstone Credit Union  
account effective: \_\_\_\_\_

Cornerstone Community Federal Credit Union  
6485 S. Transit Road • Lockport, NY 14094

Cornerstone Community Federal Credit Union  
Routing Number: **222381293**

□ □ □ □ □ □ □ □ □ □  
Account Number                       Checking       Savings

Authorized Signature(s) \_\_\_\_\_

Date \_\_\_\_\_

*Please keep a copy for your records.*