

Welcome to Public Employees Credit Union!

We're glad you're here! To help make the transition to your new PECU checking account, the steps below will guide you through the "switch" from your current account to your PECU account. Need help? No worries. Please refer to the box at the bottom of this page & we'll assign you a friendly PECU Financial Services Representative.

1. BALANCE YOUR CURRENT ACCOUNT FORM

Fill out this form to determine the ending balance in your current checking account. Then, use your ending balance total to write your check for your opening PECU deposit.

2. DIRECT DEPOSIT AND AUTOMATIC PAYMENT SWITCH FORM

Do you have direct deposit transactions or automatic payments made to your current checking account? If so, complete the enclosed Switch Form to re-direct them to PECU.

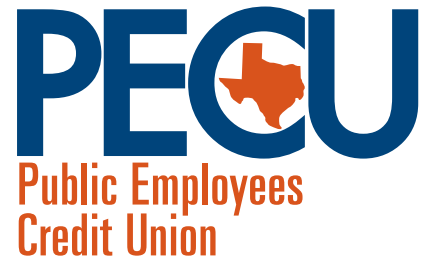
3. CLOSE ACCOUNT FORM

Completion of this form is authorization for your existing checking account to be closed. Please send the completed form to your current financial institution.



If you have any questions about these forms, please contact our Financial Services Department. We will assign a Financial Services Representative to assist you with each of the steps involved with switching your checking account to PECU. Simply call 512-474-1955. Outside of Central Texas, call toll free 1-800-772-1955.

BALANCE YOUR ACCOUNT FORM



Please use the worksheet below to balance your checkbook register using your most recent bank statement.

1. Enter the current balance on your most recent checking statement.

2. Enter deposits that do not appear on your statement (include interest earned, ATM deposits, online transfers and direct deposits).

3. Subtotal by adding the 1st and 2nd steps.

4. Enter outstanding checks, transfers and withdrawals that do not appear on your statement (include online transactions, debit card and ATM transactions, automatic debits and fees).

5. Subtract 4th step from the 3rd step. This should match your checkbook register balance. Then, write your check for this amount & use as your opening PECU deposit.

\$	_____
+ \$	_____
+ \$	_____
+ \$	_____
+ \$	_____
+ \$	_____
+ \$	_____
= \$	_____
- \$	_____
- \$	_____
- \$	_____
- \$	_____
- \$	_____
- \$	_____
- \$	_____
= \$	_____

Please review the list below to ensure all account activity is considered when closing your existing account & moving to your new PECU account.

AUTOMATIC DEPOSITS:

- Government deposits
- Brokerage deposits such as dividend & interest payments
- Transfers from other bank accounts
- Other _____

AUTOMATIC PAYMENTS:

- | | |
|-----------------------|--|
| Utilities | Internet Provider Access |
| Insurance | Loan Payments |
| Brokerage Investments | Account Transfers To Other Bank Accounts |
| Other _____ | |

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DIRECT DEPOSIT & AUTOMATIC PAYMENT



Please use this form to notify companies you currently authorize to make automatic payments from, or direct deposits to, your checking account. This form will notify these companies to re-direct that activity to your new PECU account. Please make copies of this form to provide to multiple organizations.

Note: If Social Security benefits are currently received, please contact the Social Security Administration to have deposit re-directed. The website for the SSA is www.ssa.gov. The telephone number is 1-800-772-1213 and the number for the hearing impaired is 1-800-325-0778. Questions? A PECU Financial Services Representative will be glad to assist you.

Please complete, sign and submit this form to the appropriate organization.

TO INFORMATION	FROM INFORMATION
Company Name	Member Name
Company Address	Member Address
City, State, ZIP Code	City, State, ZIP Code
Account Number	E-Mail Address

Please Direct My: Direct Deposit Automatic Payment

Effective: Immediately Beginning ___/___/___

NEW Public Employees Credit Union Account Information	
PECU Account Number (please indicate type) <input type="checkbox"/> Checking <input type="checkbox"/> Savings	PECU Routing Number
Social Security Number/TIN	Date

Signature: _____

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EXISTING ACCOUNT CLOSING FORM



To Whom It May Concern:

Please close my account described below effective ____/____/____.

Member or Customer Name
Owner Name (if applies)
Account Number
Type of Account

_____ No disbursement of this account is necessary

OR

_____ Prepare a cashier's check for the balance of my account, payable to the member/customer name listed on the account.

_____ Please include my Social Security Number/TIN _____

_____ Mail the check to this address: _____

If you have questions, please contact: _____ at _____

Thank you for your immediate attention to this matter.

Signature

Date

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