



1. Account Closure Form

Previous Financial Institution: _____

Account # to Be Closed	Account Type	Names on Account
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I authorize the closure of my account effective as of this date ____/____/____

To whom it may concern:

I hereby authorize to close the account(s) listed above at your institution. Please do one of the following:

1. Send a check of the remaining balance to my address shown here.

Address: _____
 City: _____ State: _____ Zip: _____

OR

2. Transfer the remaining balance to my Deseret First Account

Deseret First Credit Union
 Attn: Switch Kit
 P.O. Box 45046
 Salt Lake City, UT 84145
 Deseret First routing number: **324078909**
 My account number: _____. Circle one: checking savings

Authorized signature(s) _____

Date _____

Be sure to have sufficient funds in your old account long enough for outstanding checks and automatic withdraws to clear. After that, you will be able to close your old account completely.



2. Authorization to Change Automatic Payment

Complete and sign this form for each automatic payment you need switched. Then bring or mail the form(s) back to Deseret First and we will take care of the change.

I have closed my checking account at:

Name of former financial institution (please print): _____

Effective date of the account closing: ____/____/____

Account #: _____

Name(s) on account: _____

I hereby authorize automatic payment from my new checking account at:

Deseret First Credit Union

P.O. Box 45046

Salt Lake City, UT 84145

Routing # 324078909

Account# _____

Company to receive this form: _____

Address (where payment is sent): _____

Account # at this company: _____

My name(s) and address: _____

Daytime phone: _____

Signature(s) _____

Date ____/____/____



3. Direct Deposit Authorization

Give this completed form and a voided Deseret First Credit Union check to your Human Resources Department or payroll processor to have your earnings directly deposited into your Deseret First checking account.

Name: _____

Phone: _____

Employer Identification Number **OR** Social Security Number:

I hereby authorize my earnings to be directly deposited into my Deseret First Credit Union checking account. I have attached a voided check for reference. Should you need further information, Deseret First can be contacted at 800-326-3328. Please make this change effective on _____.
(Date)

My Deseret First Credit Union account number is:

My Deseret First Credit Union transit number is: **324078909**

Signature: _____

Date: _____