



Automatic Payments Transfer Form:  
Switch Kit

## Community Credit Union

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Provide this form to any company or payor who is currently making automatic debits from your Checking or Savings account.

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Account Holder Name

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Company to Receive Payment

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Address

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City

State

Zip

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

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Previous Account #: \_\_\_\_\_

Amount of Payment: \_\_\_\_\_

New Financial Institution:

Community Credit Union

757 Redwood Drive Garberville, CA 95542

Phone: (707) 923-2012 Fax: (707) 923-4199

[www.ccush.org](http://www.ccush.org)

New Checking Account#:

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Routing Number for Community Credit Union: 321180874

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Signature

Date