Switch your checking account to MSUFCU.
It’s easy! Just follow these steps:

What You’ll Need
• MSUFCU’s Routing Number: **272479663**
• Your MSUFCU Account Number
• Your MSUFCU Account Share ID

1. **Open your checking account.**

2. **Set up your direct deposit.**
   Fill out the Payroll Direct Deposit Form and give it to your employer’s payroll office or to MSUFCU to enroll in direct deposit. To change your current direct deposit, fill in the request at the bottom of the form to stop direct deposit to your previous financial institution.

   To change your Social Security direct deposit, visit [ssa.gov/deposit](http://ssa.gov/deposit) or call 800-772-1213.

3. **Update automatic payments**
   Fill out the Automatic Payments Request Form and give it to the organization that you would like to automatically withdraw from your MSUFCU account. To change your current automatic payments, fill in the request at the bottom of the form to stop automatic payments from your previous financial institution.

   Set up your payments electronically for one-time or recurring payments with our FREE **Bill Payment**!

For questions, please call 517-333-2424 or 800-678-4968, visit msufcu.org, or stop by any MSUFCU branch.
Submit the following form to your employer to move your direct deposit from your previous financial institution to MSUFCU or to enroll in direct deposit for the first time.

**Employer Information:**

Employer Name: ____________________________  Telephone Number: ____________________________

Address: ____________________________  City: ____________________________  State: ___  ZIP: ______

**Request to direct deposit to MSUFCU account:**

Financial Institution Name: MSU Federal Credit Union  Routing Number: 272479663

Account Number: ________________  Account Type: ☐ Savings  ☐ Checking

Name: ____________________________  Email Address: ____________________________

Address: ____________________________  City: ____________________________  State: ___  ZIP: ______

Telephone Number: ____________________________  Signature: ____________________________

☐ I am enrolling in direct deposit for the first time.

☐ I already have direct deposit with my previous financial institution.

**Request to STOP direct deposit to the following account:**

Financial Institution Name: ____________________________  Routing Number: ____________________________

Account Number: ____________________________  Account Type: ☐ Savings  ☐ Checking

By completing this authorization for direct deposit, I am authorizing the automatic deposit of my payroll or other funds into my MSUFCU account. The authorization is to remain in effect until the payment originator has received written notification modifying or revoking your authorization. I acknowledge I must allow the payment originator a reasonable opportunity to act on my notification.

For questions, please call 517-333-2424 or 800-678-4968, visit msufcu.org, or stop by any MSUFCU branch.
Submit the following form to the organization with whom you currently have automatic payments or to set up new automatic payments from your MSUFCU account. Some authorized withdrawals can be changed online. You may also set up recurring payments through Bill Payment.

**Withdrawal Information:**

Company or Financial Institution: ____________________________________________________________

Type of Payment: ___________________________ Amount: ____________________________

Withdrawal Date: ___________________________ Frequency: ____________________________

**Request to withdraw automatic payments from MSUFCU account:**

Financial Institution Name: MSU Federal Credit Union          Routing Number: 272479663

Account Number: ___________________________ – ___________ Account Type: □ Savings

□ Checking

**Any further questions, please contact me:**

Name: __________________________________________ Email Address: __________________________

Address: ______________________________________ City: __________________ State: ___ ZIP: _____

Telephone Number: ___________________________ Signature: ________________________________

□ I am enrolling in automatic payments for the first time.

□ I already have automatic payments set up with my previous financial institution.

**Request to STOP automatic payments from following account:**

Financial Institution Name: ___________________________ Routing Number: __________________

Account Number: ___________________________ Account Type: □ Savings

□ Checking

For questions, please call 517-333-2424 or 800-678-4968, visit msufcu.org, or stop by any MSUFCU branch.
Return the following form to the financial institution you wish to close. Be sure to leave sufficient funds in your current account long enough for remaining automatic payments, outstanding checks, and debit transactions to clear. After these items have all cleared, this form may be submitted to close the account.

Request to CLOSE the following account:

Financial Institution: ____________________________________________

I am requesting the closure of my account __________________________. Please forward the remaining funds to the address listed below:

MSU Federal Credit Union
3777 West Road
East Lansing, MI 48823

Name: ________________________________  Joint Name: ________________________________

Address: ________________________________  City: __________________ State: ____ ZIP: _____

Telephone Number: ________________________________  Date: ________________________________

Signature: ________________________________  Joint Signature: ________________________________

For questions, please call 517-333-2424 or 800-678-4968, visit msufcu.org, or stop by any MSUFCU branch.