AIM Credit Union SWITCH KIT

I'm moving accounts to AIM Credit Union.

Applicant name		
Address		
City	State	Zip
D. C. IDI		P 1 11
Preferred Phone		Email address
Please close my account at:		
Financial Institution		
Address		
City	State	Zip
Financial Institution Account Numb	per(s)	
Please liquidate the current account	(s) mentioned above and tr	cansfer the proceeds as follows:
The entire amount in accou	int(s) and close my account	t(s)
Please mail the remaining balance of	f my account(s) to:	Make this Transfer (check one):
My home address above -or- AIM Credit Union to be deposited		On this date (MM/DD/YYYY) Immediately At maturity of the investment
AIM Credit Union 1200 Associates Drive Dubuque, IA 52002		
Applicant Signature		Date
Joint-Applicant Signature		Date



563-585-3737 800-928-4328 www.aimcreditunion.com