

CHANGING BANKS IS NOW AS EASY AS 1, 2, 3, 4.

EVERYTHING YOU'LL NEED TO MAKE THE MOVE IS PROVIDED IN THIS EASY SWITCH KIT.



Start something today



EASY SWITCH KIT

GETTING STARTED

We're pleased you've decided to enjoy the great service and friendly bankers at FNB Bank. We pledge you'll always receive prompt, personal service, provided by people who know you. Changing banks can be a big decision and a real challenge. That's why we've designed the Easy Switch Kit to guide you step-by-step through the move. This Kit includes several worksheets and forms that will make it easy for you to switch in no time!

FOLLOW THESE 4 SIMPLE STEPS TO SWITCH:

- 1. OPEN AND START USING YOUR FNB BANK ACCOUNT.**
We will partner with you to help you choose the accounts and services that best fit your needs. Stop by any location to see a Customer Service Representative today.

- 2. CREATE YOUR ELECTRONIC TRANSACTION CHECKLIST.**
The enclosed electronic transaction checklist will help you identify all direct deposits and automatic payments that are reflected in your current accounts. Make sure to also include any recurring debit card transactions on this list as well. The checklist helps to ensure you haven't missed anything.

- 3. VISIT WITH AN FNB CUSTOMER SERVICE REPRESENTATIVE.**
Gather all your information and be sure to bring in your checklist to an FNB Customer Service Representative near you. Let us help you get your account switched and start something today.

- 4. CLOSE YOUR FORMER ACCOUNT.**
After all your checks have cleared and your direct deposits and automatic payments are posting to your new FNB account, make sure to properly close your other account. Ask the financial institution for their account closing procedures.

NOTE: Before you start filling out the Switch Kit, you need to download the PDF and save it to your computer. You can then fill it out and save it. You can also print the PDF and complete the forms by hand.



ELECTRONIC TRANSACTION CHECKLIST

DIRECT DEPOSIT

Direct Deposit - List all direct deposits to your account(s):

DIRECT DEPOSIT	COMPANY OR INSTITUTION NAME	ACCOUNT NUMBER	AMOUNT	DATE	COMPLETED ✓
Employer Payroll					<input type="checkbox"/>
Social Security					<input type="checkbox"/>
Pension/Retirement					<input type="checkbox"/>
Investment/Brokerage					<input type="checkbox"/>
Other:					<input type="checkbox"/>
Other:					<input type="checkbox"/>
Other:					<input type="checkbox"/>

AUTOMATIC PAYMENTS/TRANSFERS

List all withdrawals from your account(s):

PAYMENT TYPE	COMPANY OR INSTITUTION NAME	ACCOUNT NUMBER	AMOUNT	DATE	COMPLETED ✓
Home/Auto Insurance					<input type="checkbox"/>
Life Insurance					<input type="checkbox"/>
Cable/Satellite/Internet					<input type="checkbox"/>
Gas					<input type="checkbox"/>
Electric					<input type="checkbox"/>
Water					<input type="checkbox"/>
Telephone/Cell					<input type="checkbox"/>
Mortgage					<input type="checkbox"/>
Auto Loan					<input type="checkbox"/>
Home Equity Loan					<input type="checkbox"/>
Personal Loan					<input type="checkbox"/>
Credit Card					<input type="checkbox"/>
Other:					<input type="checkbox"/>
Other:					<input type="checkbox"/>
Other:					<input type="checkbox"/>
Other:					<input type="checkbox"/>



DIRECT DEPOSIT CHECKLIST

Use the Electronic Transaction Form you completed for your direct deposits you need to transfer. These are the most common:

- Payroll
- Investments
- Retirement Plans
- Social Security

DIRECT DEPOSIT AUTHORIZATION

Use this form to authorize your employer, retirement and pension funds, or any other agency to deposit your payment directly into your FNB Bank account. Use one form for each direct deposit.

NOTIFICATION OF DIRECT DEPOSIT AUTHORIZATION CHANGE

Company or Employer:

Address:

City, State, Zip:

Employee ID:
(if applicable)

Effective immediately, please deposit the net amount of my check to my FNB Bank account.

I authorize to automatically deposit funds
(name of depositor)

into the account below. This authorization shall remain in place until I have submitted a new authorization form, or until this authorization is changed or revoked by me in writing.

Place an X next to your desired options

Net amount to FNB Bank CHECKING

Account # Routing # 083901087

Net amount to FNB Bank SAVINGS

Account # Routing # 083901087

Signature:

Name:

Address:

City, State, Zip:

Phone Number:



AUTOMATIC WITHDRAWAL CHECKLIST

Use the Electronic Transaction Form you completed for your direct deposits you need to transfer. These are the most common:

AUTOMATIC WITHDRAWAL AUTHORIZATION

Use this form to authorize a change to any automatic payment, or withdrawal from your account. Use one form for each automatic withdrawal. Many companies and agencies make it easy to change your account online.

- Payroll
- Investments
- Retirement Plans
- Social Security
- Home Mortgage
- Auto Loans
- Utilities
- Insurance
- Cable/Internet
- Gym/Club Memberships
- Credit Cards
- Investments
- Subscriptions
- Charity Donations

Name of Company:

Account Number:

Payment Account:

Address:

City, State, Zip:

Phone:

Please change my automatic withdrawal from the following account

Financial Institution

Account #

Routing #

Please change or add my automatic withdrawal to the following account

Financial Institution: FNB BANK

Account #

Routing #083901087

Thank you.

This authorization will remain in effect until I have submitted to you a new authorization or until you have been notified by me in writing that this authorization has been changed or revoked.

Signature:

Name:

Address:

City, State, Zip:

Phone Number:

ACCOUNT CLOSURE REQUEST FORM

Date:

Bank Name:

Address:

City, State, Zip:

Phone:

Company Address:

City, State, Zip:

Please close the following account

Financial Institution:

Account Number:

Please send a check for the balance remaining to the address below

Signature:

Name:

Address:

City, State, Zip:

Phone Number:

Please contact me if you have any questions about this request. Thank you.