Making the switch to better banking today!

You can make the move to First Liberty Bank in three easy steps. Everything you'll need is provided in this handy Switch Kit. We can't wait to welcome you to First Liberty Bank, where you'll enjoy a better experience for all your banking needs!

1

Open your new account.

Apply online in minutes or visit your local branch to open your new First Liberty Bank account(s).

2

Switch your direct deposits and automatic withdrawals.

If you have any automatic transactions, use the provided forms to seamlessly switch them to First Liberty Bank.

3

Close your old account.

Now you're ready to switch. Simply fill out the provided form to close your old account. Any remaining account balance will be transferred to First Liberty Bank.





Direct Deposit Authorization

You can use your keyboard to fill out this form online, or you can print the form and complete it by hand.

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

Notification of D	irect Deposi	t Authoriz	zation C	hange
Company or Employer:				
Address:				
City, State, Zip:				
Phone Number:				
Employee ID: (if applicable)				
Effective immediately, pl	ease deposit the	net amount of	my check t	o my First Liberty Bank
account. I authorize (nan	ne of depositor)			
to automatically deposit	funds into the acc	count below. T	his authoriz	zation shall remain in
place until I have submit	ted a new authori	zation, or unti	il this autho	rization is changed or
revoked by me in writing.				
Place an X next to your de.	sired option.			
Net amount	to First Liberty Ba	ank CHECKIN	G	
Account #			Routing #	103013130
Net amount	to First Liberty Ba	ank SAVINGS		
Account #			Routing #	103013130
Signature:			1	Date:
Name:				
Address:				
City, State, Zip:				
Phone Number:				

Direct Deposit Checklist:

Use this list to remember all your direct deposits you need to transfer. These are the most common direct deposits.

Investment	•

____ Retirement Plans

____ Social Security





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Automatic Withdrawal Authorization

You can use your keyboard to fill out this form online, or you can print the form and complete it by hand.

Use this form to authorize a change to any automatic payment, deductions, or withdrawals from your account. Use one form for each automatic withdrawal. Or, many companies and agencies make it easy to change your account on record online on their website.

Notification of \	Withdrawal Authorization Cha	ange
Name of Company:		
Account Number:		
Payment Amount:		
Address:		
City, State, Zip:		
Phone Number:		
Please cancel all automa	atic withdrawals from my old institution :	
Financial Institution:		
Account #	Bank Routing #	
Please make all future a	utomatic withdrawals from my new institution	1:
Financial Institution:	First Liberty Bank	
Account #	Bank Routing #	103013130
	nain in effect until I have submitted to you a ne me in writing that this authorization has been o	
Signature:	1	Date:
Name:		
Address:		
City, State, Zip:		
Phone Number:		

Automatic Withdrawal Checklist:

Use this list to remember all your automatic payments you need to transfer. These are some of the most commonly used automatic payments.

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____ Insurance

___ Cable/Internet

____ Gym/Club Memberships

____ Credit Cards

____ Investments

____ Subscriptions

Charity Donations





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Account Closure Authorization

You can authorize your remaining balance to be deposited automatically to your new First Liberty Bank account(s) or paid by a check forwarded to your mailing address.

Use this form to close your account(s) at your former financial institution. Be sure to verify any outstanding items have cleared your old account.

Notification of /	Account Clos	sure Authoriza	tion
To Whom It May Conce	ern:		
Financial Institution:			
Address:			
City, State, Zip:			
Please close my accour	nt:		
Account Number:		Primary Owners	
Address:			
City, State, Zip:			
Please send the remain	ired option.	account at First Liber	ty Bank.
Account #		Routing #	103013130
Please forward m	e a check to my a	ddress listed below.	
Primary Signature:			Date:
Joint Signature:			
Name:			
Address:			
City, State, Zip:			
Phone Number:			

Congratulations!

You had to sign your name a few times...but submitting these forms completes your switch to a truly better banking experience. We can't wait to show you the difference a local partner makes.

Welcome to First Liberty Bank!



