Getting Started

Making the switch to exceptional banking today!

You can make the move to The Clay City Banking Company in three easy steps. Everything you'll need is provided in this handy Switch Kit. We can't wait to welcome you to The Clay City Banking Company, where you'll enjoy a higher quality experience for all your banking needs.

1

Open your new account.

Apply online in minutes or visit your local branch to open your new Clay City Banking Company 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 Clay City Banking Company.

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 The Clay City Banking Company.





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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 Clay City Banking Company account. Use one form for each direct deposit.

Notification of Di	rect Deposit Auth	norization Cha	inge			
Company or Employer:						
Address:						
City, State, Zip:						
Phone Number:						
Employee ID: (if applicable)						
Effective immediately, ple	ase deposit the net amou	int of my check to m	y Clay City Banking			
Company account. I author	orize (name of depositor)					
to automatically deposit f	unds into the account bel	ow. This authorization	on shall remain in			
place until I have submitted a new authorization, or until this authorization is changed or						
revoked by me in writing.						
Place an X next to your des	ired option.					
Net amount	to The Clay City Banking (Company Checking				
Account #		Routing #	081212273			
Net amount	to The Clay City Banking (Company Savings				
Account #		Routing #	081212273			
Signature:		[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.

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____ 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 W	ithdrawal Authorization Chang	ge
Name of Company:		
Account Number:		
Payment Amount:		
Address:		
City, State, Zip:		
Phone Number:		
Please change my auton Financial Institution:	natic withdrawal from the following account:	
Account #	Bank Routing #	
Please make all future au	itomatic withdrawals from the following accou	unt:
Financial Institution:	The Clay City Banking Company	
Account #	Bank Routing #	081212273
Thank you very much.		
	nin in effect until I have submitted to you a new aut me in writing that this authorization has been chan	
Signature:	D	ate:
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

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Account Closure Authorization

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You can authorize your remaining balance to be deposited automatically to your new Clay City Banking Company 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 Closure Authorization						
To Whom It May Concern	n:					
Financial Institution:						
Address:						
City, State, Zip:						
Please close my account	:					
Account Number:		Primary Owner:				
Address:						
City, State, Zip:						
Place an X next to your desi Please depos Account #	ired option. hit directly to my new acc		Banking Company. 081212273			
Please forward me a check to my address 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 The Clay City Banking Company!



