Getting Started

Making the switch to better banking today!

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

Open your new account.

Apply online in minutes or visit your local branch to open your new THE LOCAL account(s).

Switch your direct deposits and automatic withdrawals.

If you have any automatic transactions, use the provided forms to seamlessly switch them to THE LOCAL.

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 LOCAL.





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 THE LOCAL. Use one form for each direct deposit.

Notification of D	Direct Deposit Checklist:			
Company or Employer:				Use this list to remember all your direct deposits you need
Address:				to transfer. These are the most common direct deposits.
City, State, Zip:				Payroll
Phone Number:				Investments
Employee ID:				Retirement Plans
(if applicable)				Social Security
Effective immediately, pl	ease deposit the net amount o	of my check t	to my THE LOCAL	
account. I authorize (nan	ne of depositor)			
to automatically deposit	funds into the account below.	This authoriz	zation shall remain in	
place until I have submit	ted a new authorization, or un	itil this autho	orization is changed or	
revoked by me in writing				
Place an X next to your de	sired option.			
Net amount	to THE LOCAL CHECKING			
Account #		Routing #	272485194	
Net amount	to THE LOCAL SAVINGS			
Account #		Routing #	272485194	
Signature:			Date:	
Name:				
Address:				
City, State, Zip:				
Phone Number:				XIIII X





Automatic Withdrawal Authorization

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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 V	Automatic Withdrawal Checklist:		
Name of Company:			Use this list to remember all your
Account Number:			automatic payments you need to transfer. These are some of the
Payment Amount:			most commonly used automatic payments.
Address:			
City, State, Zip:			Home Mortgage
			Auto Loans
Phone Number:			Utilities
Please cancel all automa	atic withdrawals from my old institution :		Insurance
Financial Institution:			Cable/Internet
			Gym/Club Memberships
Account #	Bank Routing	#	Credit Cards
Please make all future automatic withdrawals from my new institution:			Investments
Financial Institution:	THE LOCAL		Subscriptions
Account #	Bank Routing	# 272485194	Charity Donations
	nain in effect until I have submitted to you a me in writing that this authorization has bee		

Signature:	Date:
Name:	
Address:	
City, State, Zip:	
Phone Number:	





Account Closure Authorization

You can authorize your remaining balance to be deposited automatically to your new THE LOCAL 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 A	Congratulations!		
To Whom It May Concer	m:		You had to sign your name a few timesbut submitting these forms
Financial Institution: Address:			completes your switch to a truly better banking experience. We can't wait to show you the difference a
			local partner makes.
City, State, Zip:			Welcome to THE LOCAL!
Please close my accoun	t:		
Account Number:	Primary Owner:		
Address:			
City, State, Zip:			
Please send the remain	ing balance to:		
Place an X next to your desir	red option.		
Please deposit dir	rectly to my new account at THE LOCAL.		
Account #	Routing # 2724	85194	
Please forward me	e a check to my address listed below.		
Primary Signature:	Da	ate:	
Joint Signature:			
Name:			
Address:			
City, State, Zip:			
Phone Number:			



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