

STEP 2:

Notice of Automatic Withdrawal Change

Send this form to all companies with whom you have automatic withdrawals. Make copies as needed.

Company Name: _____

Address: _____

City: _____

State: _____ Zip: _____

To Whom It May Concern:

I have recently changed my primary financial institution to **Clackamas County Bank**

You are currently withdrawing \$ _____ from my checking/savings (circle) account # (fill in next line) _____ from my current financial institution (name) with routing # _____.

The payment is for billing account # (fill in next line) _____ and is withdrawn on (date) _____.

Please begin withdrawing this payment from my account with **Clackamas County Bank**

Routing #: _____

New Checking/Savings (circle)

Account #: _____

This change is effective immediately.

If you have any additional questions, please contact me:

Name: _____

Social Security or Employee ID: _____

Address: _____

City: _____

State: _____ Zip: _____

Home Phone: _____

Work Phone: _____

E-mail: _____

Signature: _____

Date: _____

STEP 3:

Authorization to Close Account

Send this to the financial institution where you will be closing your account.

To Whom It May Concern:

Financial Institution Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Effective (month/day/year): _____

Please close my account:

Account #: _____

Primary Owner: _____

Address: _____

City: _____

State: _____ Zip: _____

Phone: _____

Please send the remaining balance to (check one):

My New Clackamas County Bank Account

Routing #: _____

Account #: _____

My Address Listed Above

Signature (Primary Owner): _____

Date: _____

Signature (Joint Owner): _____

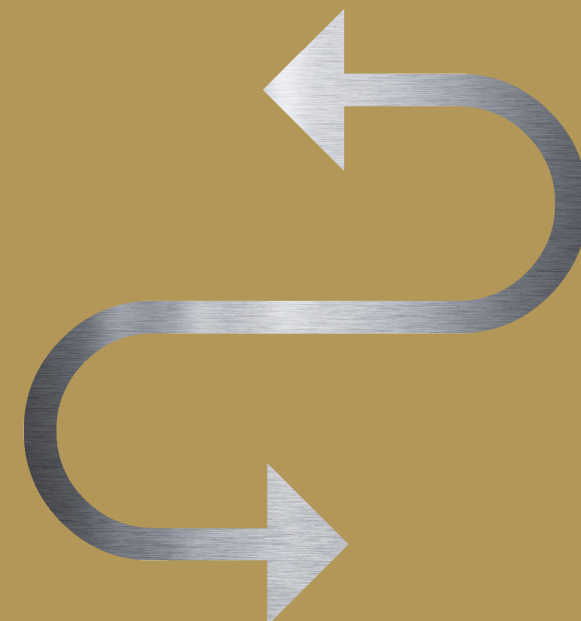
Date: _____



**Clackamas
County Bank**
SINCE 1911



CLACKAMASCOUNTYBANK.COM | (503) 668-5501



SWITCH KIT

*Switching banks is
easier than you think.*



Joining us is easy...

At Clackamas County Bank, our devoted staff is eager to go above and beyond to maintain a trustworthy and straightforward relationship with our customers. Now switching all of your accounts to Clackamas County Bank has never been easier.

This switch kit includes all of the information you need to switch your accounts to our bank. The attached forms take just minutes to complete and include everything required to notify your employer and others that you have switched your accounts to Clackamas County Bank.

Just complete the forms, make copies for everyone you need to notify, and then mail them out. It's that easy! And if you need further help or have any questions, just give us a call or stop in to see us and we'll walk you through it.

At Clackamas County Bank, we are dedicated to serving our community because we live and work here – just like you.

~ Clacakamas County Bank ~

CLOSING YOUR OLD ACCOUNT

Before you close your old account, make sure to leave enough money to cover any outstanding checks and automatic withdrawals.

Once all of these outstanding charges have been paid, ask your previous bank or credit union to send your remaining balance(s) to you or directly to your new account with us. Then, destroy all of your old checks, ATM cards, debit cards and deposit slips.

To make switching even easier for you, here's your new Clackamas County Bank Account Number and Routing Number:

Clackamas County Bank
Account #: _____

Clackamas County Bank
Routing #: _____

You can find your previous account number at the bottom of one of your old checks. Bank routing numbers are the first nine digits of the series, followed by the account number and individual check number.

STEP 1:

Authorization to Change Direct Deposit
Send this form to your employer.

Company Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Attention Direct Deposit Department:

Please direct all future payroll direct deposits to the following accounts:

Clackamas County Bank
Routing #: _____

Net paycheck to
(choose one): _____

Checking Account #: _____

Savings Account #: _____

Start Date (mo/day/year): _____

If you have any additional questions, please contact me:

Name: _____

Social Security or Employee ID: _____

Address: _____

City: _____

State: _____ Zip: _____

Home Phone: _____

Work Phone: _____

E-mail: _____

Signature: _____

Date: _____