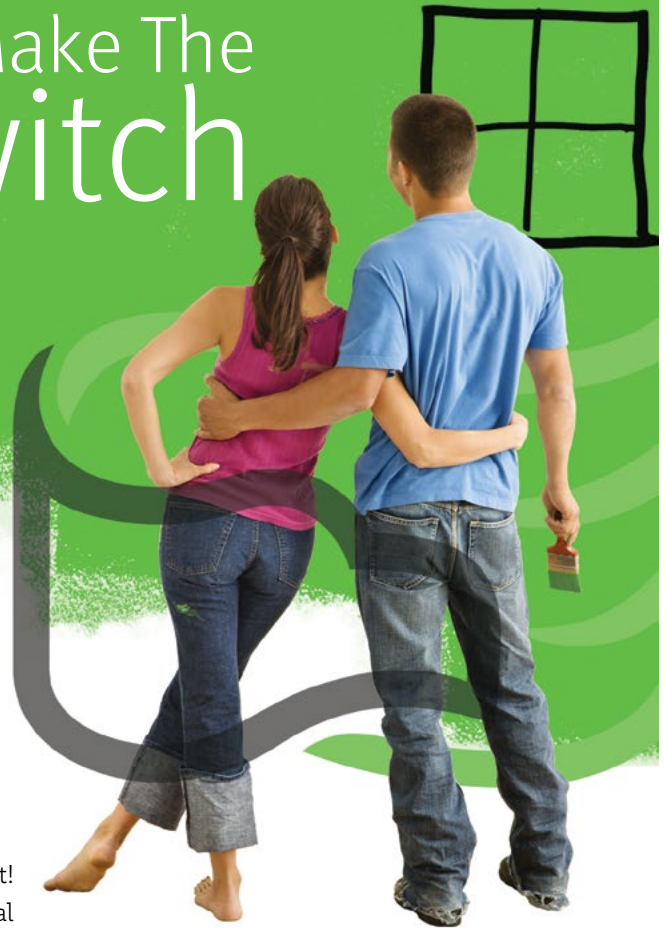


Make The Switch



Switching is Easy!

At Skagit Bank, we want to make your banking experience great! This simple, easy-to-follow kit will help you organize your financial information to open a new Skagit Bank account and close your old account. A Genuine, Lasting Relationship is just four steps away!

- 1 Organize Your Financial Information**
Gather your banking information, including all direct deposits, direct withdrawals and account numbers, then fill in the requested information on **Form A**.
- 2 Open Your New Skagit Bank Account**
Bring your required information* and this Switch Kit to any local Skagit Bank office. Our friendly employees will be happy to help you switch to better banking.
- 3 Update Your Account Information**
Use **Form B** and **Form C** to update account information for any automatic payments or deductions associated with your old bank account or accounts.
- 4 Close Your Old Account**
Once you've made sure all outstanding payments and deposits to your old accounts have cleared, use **Form D** to close your old account. It's on to better banking!

*Required Information:

One piece of valid ID, name, address (physical & mailing), date of birth, place of birth, SSN, home or cell phone, work phone, mother's maiden name, employer, occupation and email address (optional).

NOTE: This form may not function properly within all browsers. For best results, please download and complete using Adobe Reader or similar PDF-compatible application.



Genuine Lasting Relationships

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Member
FDIC



Account Worksheet

Note: Complete and bring to Skagit Bank.

In advance of visiting your Skagit Bank office to set up your new account, it's a good idea to get organized. Fill out the following form and bring it along with your required information. (See pg.1)

Current Bank Information

Bank Name:		Address:	
City:	State:	Zip Code:	
Routing #:		Account #:	
Account Type	Checking	Savings	Other

Direct Deposits

List all entities making automatic deposits into your current account and related information if available.

Company/Name	Account #	Amount	Account Used

Automatic Payments

List all entities using your current account for automatic payments or withdrawals and any related information if available.

Company/Name	Account #	Amount	Account Used



B Direct Deposit

Note: Complete one deposit form for each depositor.

Provide this completed form to depositors, along with a VOIDED check from your new Skagit Bank checking account. This form will help you easily update direct deposits to be made to your new account.

2/4

I authorize all future deposits to be made to Skagit Bank according to the following information:

Authorization

Name:	Address:	
City:	State:	Zip Code:
Email:	Phone:	SSN: <small>(if necessary)</small>
Account/ID #:		

Depositor Information

Name:	Address:	
City:	State:	Zip Code:

Skagit Bank

Address:			
City:	State:	Zip Code:	
Routing #:	Account #:		
Account Type:	Checking	Savings	Other
Amount:	100% of Net Pay	% of Net Pay	Specific Amount: .00
Effective:	Immediately	Date:	

Please contact me with any questions concerning this matter using the information listed above.

Name:

Signature:

Date:

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Automatic Payment

Note: Complete one payment form for each withdrawer.

Give this completed form to withdrawers, along with a VOIDED check from your new Skagit Bank checking account. This form will help you easily update automatic withdrawals to be deducted from your new account.

I authorize all future withdrawals/payments from me to be made according to the following information:

Authorization

Name:	Address:	
City:	State:	Zip Code:
Email:	Phone:	SSN: <small>(if necessary)</small>
Account #:		

Withdrawer Information

Name:	Address:	
City:	State:	Zip Code:

Skagit Bank

Address:		
City:	State:	Zip Code:
Routing #:	Account #:	
Account Type:	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Other	
Effective:	<input type="checkbox"/> Immediately <input type="checkbox"/> Date:	

Please contact me with any questions concerning this matter using the information listed above.

Name:

Signature:

Date:





Close Previous Account

Give this completed form to your previous bank AFTER you have opened your new Skagit Bank account and ensured all outstanding transactions have cleared.

4/4

Please close the account or accounts listed below:

Authorization

Account 1

Effective: Immediately

Date:

Account #:

Account Type:

Checking

Savings

Other

Name:

Address:

City:

State:

Zip Code:

Email:

Phone:

SSN:

(if necessary)

Joint Account Holder (if applicable)

Name:

Phone:

Account 2

Effective: Immediately

Date:

Account #:

Account Type:

Checking

Savings

Other

Name:

Address:

City:

State:

Zip Code:

Email:

Phone:

SSN:

(if necessary)

Joint Account Holder (if applicable)

Name:

Phone:

Any remaining balance(s) should be sent to me at the address listed above, in the form of a Cashier's Check. Please contact me with any questions concerning this matter using the information listed above.

Signature:

Date:

Signature:

Date:

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