



The Bank of Bolivar "Switch Kit"

5 Easy Steps to Moving Your Checking Account to BOB!

Welcome to Bank of Bolivar! We are confident that you will love your new checking account, and we invite you to check out how our bank's other products and services can be of benefit to you. First, however, we know that changing banks can be confusing to many people, so we have provided this "switch kit" to help guide you through the process!

By using this checklist and the helpful forms that accompany it, you can quickly and safely move all of your checking activities to your new Bank of Bolivar checking account in just 5 easy steps. For privacy reasons, banks are now somewhat limited in our ability to make contact with your other financial partners on your behalf, but our friendly new accounts representatives are always happy to answer any questions you may have about the process. You may contact us at any of these phone numbers:

Bolivar (downtown): 417.777.6500
Bolivar (west branch): 417.326.0290

Springfield (south): 417.380.5626
Springfield (east): 417.616.6600

Fair Grove: 417.759.6500

ACCOUNT SWITCHING CHECKLIST

1. STOP USING YOUR FORMER CHECKING ACCOUNT

- Stop writing checks on your former account, now that you have new temporary checks and a debit or ATM card
- Destroy your old checks and cut up any debit or ATM cards that are attached to that account
- Be sure to leave sufficient funds in your account to cover any outstanding payments until they have processed

2. CHANGE YOUR DIRECT DEPOSITS

- Make sure you have accounted for all deposits that are made directly to your old account (look at statements)
- Make your new BOB checking account the new destination account for these direct deposits by sending notice to your employer, retirement plan administrator, the Social Security Administration, or other income source
 - You may wish to make copies of the included Direct Deposit Authorization form for this purpose (please note that some institutions may require you to use their own form, but it will likely require most of the same information); don't forget to include a copy of a voided check from your new Bank of Bolivar checking account
 - If you receive Social Security payments, call 1-800-772-1213 to switch your direct deposit account
 - Your new checking account # is: Bank of Bolivar's ABA routing # is:

3. CHANGE YOUR AUTOMATIC PAYMENTS

- Identify all of the payments that you make automatically from your previous checking account (look at statements)
- Notify each payee that your BOB checking account will be the new source of payment funds
 - You may wish to make copies of the included Request to Transfer Automatic Payments form for this purpose (please note that some institutions may require you to use their own form, but it will likely require most of the same information); don't forget to include a copy of a voided check from your new BOB checking account
 - It is a good idea to follow-up with each payee a couple of weeks after sending them your forms

4. SIGN UP FOR ONLINE BANKING

- Although this is an optional step, online banking is a free and easy way to track the status of your direct deposits, automatic payments, other transactions, and account balances from your desktop computer or mobile device.

5. CLOSE YOUR FORMER ACCOUNT

- Make sure that all of your outstanding checks have cleared
- Make sure that all other activity - such as direct deposits and automatic payments - has stopped
- Notify your former bank of your request to close your old account
 - You may wish to make copies of the included Account Closing Request form for this purpose (please note that some institutions may require you to use their own form, but it will likely require most of the same information);
- Upon receiving your request, your former bank will send you a check for any remaining balance in your account



Direct Deposit Authorization

Complete, sign, and send a copy of this letter to each company you authorize to make Direct Deposits into your new Bank of Bolivar account(s). Attach a voided check from each account with each request.

COMPANY INFORMATION

Date _____
Company Name _____
Address _____
City _____ State _____ ZIP Code _____
Phone # _____

ACCOUNTHOLDER (/EMPLOYEE) INFORMATION

Name _____
ID or Account # _____
Address _____
City _____ State _____ ZIP Code _____
Phone Number _____ day / evening (*circle one*)

BANK INFORMATION

Bank of Bolivar
PO Box 560
Bolivar, MO 65613
417.777.6500
ABA Routing Number: 086507187

DEPOSIT INFORMATION

Account # _____ checking / saving / CD / other (*circle one*) Amount \$ _____
Account # _____ checking / saving / CD / other (*circle one*) Amount \$ _____
Account # _____ checking / saving / CD / other (*circle one*) Amount \$ _____

I authorize the above named company to make deposits into the Bank of Bolivar account(s) identified above and authorize the Bank to accept such deposits. It is agreed that these deposits and adjustments may be made electronically and under the Rules of the National Automated Clearing House Association. I understand that this authorization replaces any previous authorization and will remain in full force and effect until the company named above has received written notification from me of its termination in time to afford the company and the depository a reasonable opportunity to act.

Accountholder (/employee) Signature _____ Date _____



Request to Transfer Automatic Payments

Complete, sign, and send a copy of this letter to each company that you currently pay using an automatic withdrawal from your account. Attach a voided check from your new BOB account with each request.

Date _____
Company Name _____
Address _____
City _____ State _____ ZIP Code _____

ATTENTION: ACCOUNTS RECEIVABLE/ACCOUNTING

To Whom It May Concern,

The bank account I have been using for automatic payments on my account with your company (account number _____) is no longer active. Please immediately change the source of my automatic payments to the following:

Bank of Bolivar
PO Box 560
Bolivar, MO 65613
417.777.6500

ABA Routing Number: **086507187**

My Bank Account #:

If you have any questions regarding this request, please call me immediately at the number listed below. Thank you for your assistance.

Signature(s) _____ / _____
Name(s) _____ / _____
Address _____
City _____ State _____ ZIP Code _____
Phone Number _____ day / evening (circle one)



Account Closing Request

Date _____
Former Bank's Name _____
Address _____
City _____ State _____ ZIP Code _____

This letter is to inform you that I (we) have decided to close the account(s) listed below. Please send a check for any remaining funds in the account(s) to my address listed below. If you have any questions regarding this request, please contact me at the phone number or address listed here. Thank you.

ACCOUNT OWNER INFORMATION

Account Owner Name _____
Co-Owner Name (if any) _____
Address _____
City _____ State _____ ZIP Code _____
Phone Number _____ day / evening (*circle one*)

ACCOUNT INFORMATION

Account Number _____ checking / saving / CD / other (*circle one*)
Account Number _____ checking / saving / CD / other (*circle one*)
Account Number _____ checking / saving / CD / other (*circle one*)
Account Number _____ checking / saving / CD / other (*circle one*)

Account Owner Signature _____ Date _____
Co-Owner Signature (if any) _____ Date _____