

IT'S SO EASY TO SWITCH.

NASB Switch Kit



Let's Get Started

Simply follow the steps below and use the forms provided.

Step 1: Open a NASB checking account online or in a branch.

- Open an account online at <u>nasb.com/checking</u>.
- Use our branch and ATM locator at <u>nasb.com/ATM</u> to find the NASB bank branch closest to you.

Step 2: Enroll in NASB Internet Banking.

- Easily track your direct deposits, automatic withdrawals or payments and checks as they clear your NASB account.
- Enroll in Internet Banking at <u>nasb.com/IB</u>.

Step 3: Stop using your former checking account.

 Be sure to leave sufficient funds in your former account until all outstanding checks have cleared and any automatic payments/withdrawals have been successfully transferred to NASB.

Step 4: Switch your Direct Deposits.

- Print and complete the Direct Deposit Authorization Form.
- Take the form to your employer's payroll department.
- View sample cover letter.

Step 5: Redirect your automatic payments/withdrawals.

- Print and complete the Automatic Withdrawal Authorization Form.
- Contact each company to provide your new checking account number and routing transit number. Use our Switch Kit Checklist to gather all of your information in one place for easy reference.
- View sample cover letter.

Step 6: Close your former account at the other institution.

- Ensure that all checks and transactions have cleared.
- Print and complete the Account Closure Authorization Form.
- Transfer the remaining balance to your new NASB account and close the former account.
- Remember to shred or destroy any old checks and debit cards for security purposes. Bring them to any NASB branch location and we'd be happy to handle this for you!

It's that simple!

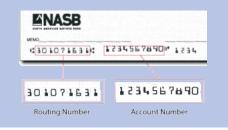
Thank you for choosing NASB. We value and appreciate your business.

We're here to help.

If we can be of assistance throughout the transition, please call any of our branch locations or Deposit Services at 816.316.4000.

Routing and Account Numbers

- The bank's routing number is the 9-digit number located in the bottom left corner of your check.
- 2. Your account number is the set of numbers appearing just after the routing number.





FORM 1 DIRECT DEPOSIT AUTHORIZATION

Use this form to authorize your employer, retirement and pension funds, or any other depositing agencies or organizations to make deposits directly into your NASB account. Use one form for each Direct Deposit, make copies as needed.

To Whom It May Concern:

Name of Company:	 	
Account Number:		
Payment Amount:		
Address:		
City, State, Zip:		
Phone Number:		

Please discontinue making direct deposit(s) to the following account:

Former Institution:

ABA/Routing Number:_____

Account Number:_____

Please begin making direct deposit(s) to the following NASB account:

Financial Institution:	North American Savings Bank ("NASB")
------------------------	--------------------------------------

ABA/Routing Number: 301071631

Checking
 Savings

Effective:
Immediately
Beginning ____/___/

This includes authorization to correct any entries made in error, and this authorization will remain in effect until cancelled by written notice. Thank you!

Customer Signature

Date
ease Print
lame:
ddress:
ity, State, Zip:
hone Number:

Three Easy Steps:

- 1. Fill out this form.
- 2. Provide your new NASB account number. Attach a voided check to confirm your account number and ABA routing number.
- 3. Submit this completed form to your employer's payroll department or any other agency or organization that makes deposits directly into your bank account.

Direct Deposit Checklist:

- _____ Employee Payroll
- _____ Investment Income
- _____ Pension/Retirement Income
- _____ Social Security Administration*
- _____ Other

*Social Security Administration or Social Security Insurance payments may require you to contact the Social Security Administration directly at 1.800.772.1213.



ATTACH VOIDED NASB CHECK

FORM 2 AUTOMATIC WITHDRAWAL AUTHORIZATION

Use this form to authorize a change to any automatic withdrawals or deductions. Use one form for each automatic withdrawal, make copies as needed.

Note: If you have used your debit/credit card for automatic withdrawals online, you will need to contact these companies and provide them with your new NASB debit or credit card information.

To Whom It May Concern:

Name of Company:
Account Number:
Payment Amount:
Address:
City, State, Zip:
Phone Number:

Please discontinue my automatic withdrawal from the following account:

Former Institution:

ABA/Routing Number:_____

Account Number:____

Date

Please Print Name:

Address:

City, State, Zip:

Phone Number:

Please make all future automatic withdrawals from the following account:

Financial Institution: North American Sav	vings Bank ("NASB")	
ABA/Routing Number: 301071631		
Account Number:	□ Checking □ □ Savings	
Effective: 🗆 Immediately 🗆 Beginni	ing//	
This includes authorization to correct any en authorization will remain in effect until canc Thank you!		
Customer Signature		

Three Easy Steps:

- 1. Fill out this form.
- 2. Provide your new NASB account number. Attach a voided check to confirm your account number and ABA routing number.
- 3. Submit this completed form to any company that withdraws funds from your account.

Automatic Withdrawal Checklist:

- Mortgage/Rent
- Auto Insurance
- Utilities
- Cable
- Cell Phone
 - Credit Card
 - Membership Fees
 - Other



ATTACH VOIDED NASB CHECK

FORM 3 ACCOUNT CLOSURE AUTHORIZATION

Use this form to authorize the closure of your account at your former financial institution. Prior to closing, be sure to verify that any outstanding items have cleared and your direct deposits or automatic withdrawal requests (if applicable) have switched over to your new NASB account.

To Whom It May Concern:

Financial Institution:	
Address:	
City, State, Zip:	
Phone Number:	
Please close my account:	
Account Number:	Checking Savings
Primary Owner:	
Address:	
City State Zin:	

Three Easy Steps:

- 1. Fill out this form.
- 2. Provide your new NASB account number.
- 3. Submit this completed form to the financial institution where you will be closing your account.

Please send the remaining balance to:

(check the box of your desired option)

 $\hfill\square$ Please deposit directly to my new account at NASB.

ABA/Routing Number: 301071631

Account Number:

 $\hfill\square$ \hfill Please forward me a check to my address listed below.

If you have any questions about this request, please contact me at the number below. Thank you.

Primary Signature:	
	Date
Joint Signature:	
(If applicable)	Date
Please Print	
Name:	
Address:	
City, State, Zip:	
Phone Number:	



SWITCH KIT CHECKLIST

Use this form to gather all your automatic payment and deposit information in one place for easy reference.

AUTOMATIC PAYMENT/WITHDRAWAL CHECKLIST

PAYMENT	COMPANY	ACCOUNT NUMBER	AMOUNT	DATE OF PAYMENT	SWITCH COMPLETE
Mortgage/Rent					
Auto Loans					
Insurance					
Electric					
Gas/Oil					
Cable/Satellite					
Internet Provider					
Cell Phone					
Water/Sewer					
Trash Removal					
Daycare					
Credit Cards					
Health Club					
Investments					
IRA/Retirement					
Charities					
Tuition/School Expense					
Other					

DIRECT DEPOSIT CHECKLIST

PAYMENT	COMPANY	ACCOUNT NUMBER	AMOUNT	DATE OF PAYMENT	SWITCH COMPLETE
Employee Payroll					
Pension/Retirement					
Social Security					
Investment Incomes					
Other					

HELPFUL RESOURCES

Social Security Administration	800.772.1213	www.ssa.gov
Department of Veterans Affairs	877.838.2778 or 800.827.1000	www.va.gov

If we can be of assistance throughout the transition, please call any of our branch locations or Deposit Services at 816.316.4000. Date

Biller Name Biller Address City, State, Zip

Re: [YOUR ACCOUNT NUMBER]

To Whom It May Concern:

I am writing to request that my payment be automatically withdrawn from my account at NASB. Enclosed is a completed Automatic Withdrawal Authorization form, which includes the required bank account information, as well as my contact information. A voided check is also enclosed.

Thank you for your assistance with this request. Please do not hesitate to contact me should you have any questions.

Sincerely,

Your Name Your Address Your Phone Number Date

Biller Name Biller Address City, State, Zip

To Whom It May Concern:

I am writing to request direct deposit of my paycheck into my account at NASB. Enclosed is a completed Direct Deposit Authorization form, which includes the required bank account information, as well as my contact information. A voided check is also enclosed.

Thank you for your assistance with this request. Please do not hesitate to contact me should you have any questions.

Sincerely,

Your Name Your Address Your Phone Number