It's easy to switch your accounts to First Bank, please use this Switch Kit to assist in the transition. First Bank Customer Service Representatives are available to answer any questions. Follow these simple steps to get started:

Open Your First Bank Checking Account

Deposit funds into your new checking account, request your instant issue debit card(s), order checks and deposit slips. Note First Bank's routing number, your new checking account number and debit card information to switch any scheduled transactions from your old account to your new account with us.

Switch Your Recurring Transactions to Your New Account

Using our helpful switch kit, write down your recurring debit and credit transactions including automatic payments, bill pay and online payments. You'll need to switch everything to your new First Bank routing and checking account numbers. You will need to complete one form for each transaction you are switching.

Note: To switch the direct deposit of your Social Security check, call 800-772-1213. For all other U.S. Government issued checks, talk to one of our banking professionals or download the approved form at http://www.fms.treas.gov/eft/fms_form_1200.pdf.

? Close Your Old Accounts

Keep the old account open until all outstanding transactions have cleared and you've moved your scheduled transactions to your new First Bank checking account, debit card or bill pay. Once you verify that all your transactions have cleared, close your old account.

Consumer Switch Kit Direct Deposit

If you need help completing this form, talk to one of our banking professionals.

)ate:	To [Company name]:				
Street address:	City:	State: Zip:			
INSTRUCTIONS FOR CHAI	NGING DIRECT DEPOSIT ————————————————————————————————————				
Dear Employer, I have recently changed banks and v	would like my payroll direct deposit switched from my old ac	ecount to my new account with First Bank.			
Name:	Social Security #:				
	RECT DEPOSIT GOING TO:				
Financial institution :					
Financial institution :					
Financial institution :					
Financial institution :					
Financial institution :					
Financial institution : Account # : PLEASE CHANGE THIS TO	Bank routing #:	ON AS POSSIBLE:			
Financial institution : Account # : PLEASE CHANGE THIS TO Account # :	Bank routing #: MY NEW ACCOUNT WITH FIRST BANK AS SO	ON AS POSSIBLE:			
Financial institution: Account #: PLEASE CHANGE THIS TO Account #: If for any reason you may need add	Bank routing #: MY NEW ACCOUNT WITH FIRST BANK AS SO Bank routing #:	ON AS POSSIBLE:			
Financial institution: Account #: PLEASE CHANGE THIS TO Account #: If for any reason you may need add Signature:	Bank routing #: MY NEW ACCOUNT WITH FIRST BANK AS SO Bank routing #: Bank routing #:	ON AS POSSIBLE:			

Consumer Switch Kit Payment/Deposit Change

Complete this payment/deposit change form for each automatic payment or deposit you currently have scheduled.

Date:				
To whom it may concern,				
I am writing to inform you of a change con	cerning my account #:			
I currently have my payment automatically	∕ □ withdrawn from □ denosi	i ted to my checking/savings wit	h	
Tour entry have my payment automatically	D WITHUI AWITH OIL LI GEPOSI	tou to my checking/ savings with	11	
financial institution:		·		
Effective, on the date:	_, please begin _ withdrawing	depositing this payment, ac	ocording to the	e same
terms as agreed upon, from:				
First Bank				
P.O. Box 1237				
Clewiston, FL 33440				
Routing #: 067003778				
Account #:				
Thank you for your prompt attention to th	nie reauest			
Sincerely.	no i equest.			
cincon dry,				
Name:	Sign	naturo:		
Name.	Oigi	latul 6.		
Co-signer name:	Co-	signer signature:		
Street address:	City	/:	_ State:	_ Zip:
Email address:	Tele	ephone #:		



Consumer Switch Kit Account Closing

If you need help completing this form, talk to one of our banking professionals.

fective date*:	To [Financial institution name]:					
treet address:		State: Zip:				
rom [Names on the account]:		Social Security #:				
PLEASE CLOSE THE FOI	LOWING ACCOUNTS	S WITH YOUR INSTITUTION: —				
Account type	Account #	Send payment at once	Defer payment until close of interest payment			
EODWADD EIINDS TO M	E AT THE EOLI OWING	G ADDRESS:				
	-	become due on above listed accounts.				
Street address:		City:	State: Zip:			
oti oot addi ooo						
	additional information, plea	ase call me at :				