Getting Started

Making the switch to better banking today!

You can make the move to Altamaha Bank in three easy steps. Everything you'll need is provided in this handy Switch Kit. We can't wait to welcome you to Altamaha Bank, where you'll enjoy a better experience for all your banking needs!

1

Open your new account.

Apply online in minutes or visit your local branch to open your new Altamaha Bank account(s).

2

Switch your direct deposits and automatic withdrawals.

If you have any automatic transactions, use the provided forms to seamlessly switch them to Altamaha Bank.

3

Close your old account.

Now you're ready to switch. Simply fill out the provided form to close your old account. Any remaining account balance will be transferred to Altamaha Bank.





Direct Deposit Authorization

You can use your keyboard to fill out this form online, or you can print the form and complete it by hand.

Use this form to authorize your employer, retirement and pension funds, or any other agency to deposit your payment directly into your Altamaha Bank account. Use one form for each direct deposit.

Notification of Di	rect Deposit A	uthorization C	Change			
Company or Employer:						
Address:						
City, State, Zip:						
Phone Number:						
Employee ID: (if applicable)						
Effective immediately, plo	ease deposit the net a	mount of my check	to my Altamaha Bank			
account. I authorize (nan	ne of depositor)					
to automatically deposit f	to automatically deposit funds into the account below. This authorization shall remain in					
place until I have submit	place until I have submitted a new authorization, or until this authorization is changed or					
revoked by me in writing.						
Place an X next to your des	sired option.					
Net amount	to Altamaha Bank CH	ECKING				
Account #		Routing #	061212439			
Net amount	to Altamaha Bank SA	VINGS				
Account #		Routing #	061212439			
Signature:			Date:			
Name:						
Address:						
City, State, Zip:						
Phone Number:						

Direct Deposit Checklist:

Use this list to remember all your direct deposits you need to transfer. These are the most common direct deposits.

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____ Social Security





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Automatic Withdrawal Authorization

You can use your keyboard to fill out this form online, or you can print the form and complete it by hand.

Use this form to authorize a change to any automatic payment, deductions, or withdrawals from your account. Use one form for each automatic withdrawal. Or, many companies and agencies make it easy to change your account on record online on their website.

Name of Company: Account Number: Payment Amount: Address: City, State, Zip: Phone Number: Please cancel all automatic withdrawals from my old institution: Financial Institution: Account # Bank Routing # Please make all future automatic withdrawals from my new institution: Financial Institution: Altamaha Bank Account # Bank Routing # 061212439 This authorization will remain in effect until I have submitted to you a new authorization, or until you have been notified by me in writing that this authorization has been changed or revoked. Signature: Name:	Notification of \	Withdrawal Authorization Cha	ange
Payment Amount: Address: City, State, Zip: Phone Number: Please cancel all automatic withdrawals from my old institution: Financial Institution: Account # Bank Routing # Please make all future automatic withdrawals from my new institution: Financial Institution: Altamaha Bank Account # Bank Routing # O61212439 This authorization will remain in effect until I have submitted to you a new authorization, or until you have been notified by me in writing that this authorization has been changed or revoked. Signature: Name:	Name of Company:		
Address: City, State, Zip: Phone Number: Please cancel all automatic withdrawals from my old institution: Financial Institution: Account # Bank Routing # Please make all future automatic withdrawals from my new institution: Financial Institution: Altamaha Bank Account # Bank Routing # 061212439 This authorization will remain in effect until I have submitted to you a new authorization, or until you have been notified by me in writing that this authorization has been changed or revoked. Signature: Date: Name:	Account Number:		
City, State, Zip: Phone Number: Please cancel all automatic withdrawals from my old institution: Financial Institution: Account # Bank Routing # Please make all future automatic withdrawals from my new institution: Financial Institution: Altamaha Bank Account # Bank Routing # O61212439 This authorization will remain in effect until I have submitted to you a new authorization, or until you have been notified by me in writing that this authorization has been changed or revoked. Signature: Name:	Payment Amount:		
Phone Number: Please cancel all automatic withdrawals from my old institution: Financial Institution: Account # Bank Routing # Please make all future automatic withdrawals from my new institution: Financial Institution: Altamaha Bank Account # Bank Routing # 061212439 This authorization will remain in effect until I have submitted to you a new authorization, or until you have been notified by me in writing that this authorization has been changed or revoked. Signature: Name:	Address:		
Please cancel all automatic withdrawals from my old institution: Account # Bank Routing # Please make all future automatic withdrawals from my new institution: Financial Institution: Altamaha Bank Account # Bank Routing # 061212439 This authorization will remain in effect until I have submitted to you a new authorization, or until you have been notified by me in writing that this authorization has been changed or revoked. Signature: Name:	City, State, Zip:		
Financial Institution: Account # Bank Routing # Please make all future automatic withdrawals from my new institution: Financial Institution: Altamaha Bank Account # Bank Routing # 061212439 This authorization will remain in effect until I have submitted to you a new authorization, or until you have been notified by me in writing that this authorization has been changed or revoked. Signature: Name:	Phone Number:		
Account # Bank Routing # Please make all future automatic withdrawals from my new institution: Financial Institution: Altamaha Bank Account # Bank Routing # 061212439 This authorization will remain in effect until I have submitted to you a new authorization, or until you have been notified by me in writing that this authorization has been changed or revoked. Signature: Name:	Please cancel all automa	atic withdrawals from my old institution :	
Please make all future automatic withdrawals from my new institution: Financial Institution: Altamaha Bank Account # Bank Routing # 061212439 This authorization will remain in effect until I have submitted to you a new authorization, or until you have been notified by me in writing that this authorization has been changed or revoked. Signature: Date:	Financial Institution:		
Financial Institution: Account # Bank Routing # 061212439 This authorization will remain in effect until I have submitted to you a new authorization, or until you have been notified by me in writing that this authorization has been changed or revoked. Signature: Date:	Account #	Bank Routing #	
Account # Bank Routing # 061212439 This authorization will remain in effect until I have submitted to you a new authorization, or until you have been notified by me in writing that this authorization has been changed or revoked. Signature: Date:	Please make all future a	utomatic withdrawals from my new institution	1:
This authorization will remain in effect until I have submitted to you a new authorization, or until you have been notified by me in writing that this authorization has been changed or revoked. Signature: Date: Name:	Financial Institution:	Altamaha Bank	
you have been notified by me in writing that this authorization has been changed or revoked. Signature: Date:	Account #	Bank Routing #	061212439
Name:			
	Signature:		Date:
Addrocs	Name:		
Audicas:	Address:		
City, State, Zip:	City, State, Zip:		
Phone Number:	Phone Number:		

Automatic Withdrawal Checklist:

Use this list to remember all your automatic payments you need to transfer. These are some of the most commonly used automatic payments.

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Credit	Cards

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Account Closure Authorization

You can authorize your remaining balance to be deposited automatically to your new Altamaha Bank account(s) or paid by a check forwarded to your mailing address.

Use this form to close your account(s) at your former financial institution. Be sure to verify any outstanding items have cleared your old account.

To Whom It May Conce	rn:		
Financial Institution:			
Address:			
City, State, Zip:			
Please close my account	nt:		
Account Number:		Primary Owner:	:
Address:			
City, State, Zip:			
	_		
	red option.	ccount at Altamaha	
Place an X next to your design Please deposit di Account #	rectly to my new ac	Routing #	Bank. 061212439
Place an X next to your design Please deposit di Account #	rectly to my new ac		
Place an X next to your design Please deposit di Account #	rectly to my new ac	Routing #	
Place an X next to your design Please deposit displayed Account # Please forward m	rectly to my new ac	Routing #	061212439
Place an X next to your designature: Please deposit di Account # Please forward m	rectly to my new ac	Routing #	061212439
Place an X next to your designature: Please deposit di Account # Please forward m Primary Signature: Joint Signature:	rectly to my new ac	Routing #	061212439
Place an X next to your designature: Please deposit di Account # Please forward m Primary Signature: Joint Signature: Name:	rectly to my new ac	Routing #	061212439

Congratulations!

You had to sign your name a few times...but submitting these forms completes your switch to a truly better banking experience. We can't wait to show you the difference a local partner makes.

Welcome to Altamaha Bank!



