



# TWIN OAKS

*Checking*

A product of



*Make the Switch  
to a Better Way to Bank*

Thank you for allowing us to be your bank!  
Banking with CB&T can be done in three simple steps.  
Please use the provided forms for a seamless transition.

1

Open Your Account

2

Switch your  
Automatic Withdrawals  
and Direct Deposits

3

Close your old  
Account



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## DIRECT DEPOSIT AND AUTOMATIC WITHDRAWAL CHECKLIST

Please use this list to remember all of the Direct Deposits and Automatic Payments to transfer.

### **Direct Deposit Checklist:**

- Social Security
- Disability
- Investments
- Retirement
- Payroll

### **Automatic Payment Checklist:**

- Mortgage
- Auto Loan
- Insurance
- Utilities
- Credit Cards
- Subscriptions/Memberships
- Internet
- Cell Phone



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## DIRECT DEPOSIT AUTHORIZATION CHANGE

This form is used to authorize your employer, retirement and pension funds, or any other agency to deposit your payment directly into your Twin Oaks Checking account. Use one form for each direct deposit.

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Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip : \_\_\_\_\_  
Phone Number: \_\_\_\_\_

I authorize, (name of depositor) \_\_\_\_\_ to automatically deposit funds into the account below. This change shall be in effect until a new authorization is submitted, or until this authorization is changed or revoked by me.

Checking Account Number: \_\_\_\_\_ Amount: \_\_\_\_\_  
Savings Account Number: \_\_\_\_\_  
Routing Number: 084304272 Amount: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



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## WITHDRAWAL AUTHORIZATION CHANGE

Use this form to authorize a change to any automatic payment, deductions, or withdrawals from your account. One form should be used for each withdrawal.  
For many companies you can change your account information online.  
Be sure to check their website.

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip : \_\_\_\_\_

Phone Number: \_\_\_\_\_

Account Number: \_\_\_\_\_

Payment Amount : \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Please change my automatic withdrawal from the following account:

Financial Institution: \_\_\_\_\_

Account Number: \_\_\_\_\_

Routing Number: \_\_\_\_\_

Please change my automatic withdrawal to the account below. This change shall be in effect until a new authorization is submitted, or until this authorizations is changed or revoked by me.

Account Number: \_\_\_\_\_

Routing Number: 084304272

\_\_\_\_\_ Checking

\_\_\_\_\_ Savings



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## ACCOUNT CLOSURE AUTHORIZATION CHANGE

This form can be used to close your account(s) at your former financial institution.

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Financial Institution: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip : \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Please close the following account(s):**

Checking Account Number: \_\_\_\_\_

Savings Account Number: \_\_\_\_\_

**The remaining balance on my account can be: (Check One)**

Check mailed to the address below

Deposited into my Twin Oaks Checking Account

Account Number: \_\_\_\_\_ Routing Number: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_