





FNBD has made the process of switching your bank accounts easy!

Simply follow the steps.

Open an account with FNBD. Stop by your local FNBD branch! We offer several checking options, and our Customer Service Representatives (CSR) can assist you with finding the account that works best for you. You can make the account opening process faster by completing our Switch Kit Account Holder Information & Survey (*page 2*) prior to coming in the branch.

Stop using your old account. Let the checks you have written clear, making sure to maintain a sufficient balance in the account to cover outstanding checks or any additional payments. Begin using your FNBD account once sufficient funds are deposited.

Sign up for Online Banking. Use our Online Banking and convenient Mobile Banking app to help manage the transition to FNBD. Ask your CSR for more information on how to sign up!

Re-direct your Direct Deposits. Simply complete the Direct Deposit Authorization Change Form (*page 5*), and submit to your employer's Human Resources department or to the applicable company.

Close your old account. Complete the Account Closing Form (*page 7*), and mail it to your previous financial institution. Once all checks have cleared, direct deposits have transferred, and you see your automatic payments come out of your new FNBD account, make sure to shred any old checks for your security.

Change your Automatic Payments or Withdrawals. Use the provided Automatic Payment or Withdrawal Authorization Change Form (*page 6*) to notify applicable parties of your new account information. Make sure to cancel any automatic Bill Pay transactions setup with your former bank and begin using FNBD Online Bill Pay for free.

Thank you for choosing FNBD! We look forward to serving you.

If you have any questions or concerns during this process, don't hesitate to contact us. Call us toll free at **1-844-OUR-FNBD** (1-844-687-3623) to speak with a Customer Service Representative about opening a checking account.



Switch Kit Commercial Easy-Open Form

Use this worksheet to collect information that will be needed to establish your new banking relationship with FNBD. Please complete the attached form for each authorized signer. **REMINDER:** When you visit our banking center, don't forget your Driver's License or government-issued photo ID.

Business Name		
Physical Address		
Mailing Address		
()Business Phone	()Business Fax	
Main Contact	Contact Number	
* Authorized Signers:		
>		
>		
>		

Additional Items Needed:

 \Box Articles of Organization

□ Certificate of State Filing

 $\hfill\square$ Verification of "Good Standing" with the LA Secretary of State

Thank you for choosing to **bankFNBD**! We appreciate the opportunity to serve you.

*Please complete the attached form for each authorized signer.

www.bankfnbd.com -



Use this worksheet to collect information that will be needed to establish your new banking relationship with FNBD. Please complete this form for each authorized signer. **REMINDER:** When you visit our banking center, don't forget your Driver's License or government-issued photo ID.

First Name	Middle Name	Last Name
Social Security Number		Date of Birth
Physical Address		
Mailing Address		
()	()	
Phone Number	Business P	Phone
	()	
Main Contact	Contact N	umber
Employer	Occupatio	n/Title
Email Address		
Driver's Licence #	Issuing Sta	ate
Issue Date	Expiration	Date

Thank you for choosing to **bankFNBD**! We appreciate the opportunity to serve you.



Switch Kit Account Holder Information & Survey

Use this worksheet to collect information that will be needed to establish your new banking relationship with FNBD. Please complete this form for each additional joint owner on the account. **REMINDER:** When you visit our banking center, don't forget your Driver's License or government-issued photo ID.

First Name	Middle Name	Last Name
Address		Apt No.
City	State	Zip Code
Social Security Number	Date of Birth	Mother's Maiden Name
Phone Numbers: Home	Cell	Work
Employer	Email Address	
•••	services do you have with your c i □ Money Market □ Christmas	
		ng □ Bill Pay □ Mobile Banking
	quity LOC 🗆 Personal LOC 🗔 🤅	
What additional products an	d services would you like to use (or learn more about?
what additional products an		
□ Checking □ Savings	🗆 Money Market 🛛 Christmas	Club 🗆 Certificate Deposit



Your New FNBD Account Information

Financial Institution Information

First National Bank DeRidder 131 N. Washington St. P.O. Box 700 DeRidder, LA 70634

Routing/Transit Number 065200997

New Account Numbers and Card Numbers

(We'll help you complete this section when you open your account.)

Checking	Savings
Money Market	Other
Debit Card Number	Expiration Date
Credit Card Number	Expiration Date
Have your CSR attach a business card here.	



AUTOMATIC PAYMENTS/DRAFTS

- □ Mortgage/Rent
- Auto Loan
- □ Credit Card
- □ Auto Insurance
- □ Life Insurance
- □ Utilities
- □ Cable/TV
- □ Cell Phone
- □ Internet
- □ Fitness Club
- □ Tuition
- □ Childcare
- □ Investments
- □ IRA/Retirement
- Other _____
- Other
- Other _____
- □ Other _____

DIRECT DEPOSITS

- Direct Deposits:
- Payroll
- □ Pension/ Retirement
- □ Social Security
- □ Investment Income
- □ Other _____
- □ Other _____
- □ Other _____
- □ Other _____

Date		-	
То	Attn: Human Resources/ Payroll Department	_ (Employer/Company)	Use this form to change your direct deposit account to FNBD.
		_ (Address Line 1)	We recommend attaching a
Primary	y Account Holder	(Address Line 2)	voided check from your new FNBD account with this request.
Consud		_ (Name) _ (Address Line 1) _ (Address Line 2)	Note: Your employer or provider may have their own form required to authorize the account change.
Secona	ary Account Holder		
		_ (Name)	
		_ (Address Line 1)	
		(Address Line 2)	

To whom it may concern:

Please change the account on record for my direct deposit. You are currently depositing my entire paycheck, part of my paycheck, or a type of payment into the following account:

Old Bank	
Old Routing #	
Old Account #	

Please begin making these automatic deposits into my new FNBD bank account:

New Bank	First National	Bank DeRidder

New Routing # 065200997

New Account # _____

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

Name	 	
Signature	 	
Address		
Phone #	 	



Automatic Payment or Withdrawal Authorization Change Form

ToAttn: Bil	lling/ Accounts Receivable	(Address Line 1)	Use this form to change your automatic payments to come out of your FNBD account. We recommend attaching a
Primary Accoun			voided check from your new FNBD account with this request.
	unt Holdor		Note: Your provider may have their own form required to authorize the account change.
-			
		(Address Line 1)	
Reference #	nanged to FNBD. You are currently del		following payment:
Payment Amt			
Payment Date			
Frequency			
Please stop mak Old Bank Old Routing # Old Account #	ing withdrawals from the following ac		/:
And begin debit	ing payments from my new FNBD acco	ount:	
New Bank	First National Bank DeRidder	· · · · · •	
New Routing #			
New Account #			
Account Type	□ Checking □ Savings	-	
Thank you, and i	f you have any questions about this rea	quest, please contact me a	at the number below.

Printed Name ______
Signature ______
Phone # ______

Account Closing Form

Date		
То	(Bank Name) (Address Line 1) (Address Line 2)	Use this form to close out your old accounts. To close multiple accounts, we recommend completing a form for each.
Primary Account Holder		
	(Name) (Address Line 1) (Address Line 2)	Make sure all outstanding checks have cleared and that all direct deposits and payments have been setup for your new
Secondary Account Holder	(Name)	FNBD account prior to closing your accounts.
	(Address Line 1)	
	(Address Line 2)	

To whom it may concern:

Please accept this form as my authorization to close the account listed below with your institution:

Account #	<u></u>		<u>_</u>	
Account Type	Checking	Savings		Money Market

Please send a check in the amount of my account balance plus any accrued interest to my attention at the address on file. Thank you, and should you have any questions or concerns, you may contact me by phone at the number provided below.

Account Holder	
Signature	
Phone #	

