Making the switch to better banking today!

You can make the move to Sharon Bank in three easy steps. Everything you'll need is provided in this handy Switch Kit. We can't wait to welcome you to Sharon 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 Sharon 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 Sharon 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 Sharon Bank.





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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 Sharon Bank account. Use one form for each direct deposit.

| Notification of Direct Deposit Authorization Change | | | | |
|---|--------------------|----------------|---------------|------------------------|
| Company or Employer: | | | | |
| Address: | | | | |
| City, State, Zip: | | | | |
| Phone Number: | | | | |
| Employee ID: (if applicable) | | | | |
| Effective immediately, pl | ease deposit the r | net amount of | f my check t | o my Sharon Bank |
| account. I authorize (nan | ne of depositor) | | | |
| to automatically deposit | funds into the acc | count below. | Γhis authoriz | zation shall remain in |
| place until I have submit | ted a new authori | zation, or unt | il this autho | rization is changed or |
| revoked by me in writing. | | | | |
| Place an X next to your de | sired option. | | | |
| Net amount | to Sharon Bank C | HECKING | | |
| Account # | | | Routing # | 231372141 |
| Net amount | to Sharon Bank S | AVINGS | | |
| Account # | | | Routing # | 231372141 |
| | | | | |
| 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.

| Investment |
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____ Social Security





Automatic Withdrawal Authorization

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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: Sharon Bank Account # Bank Routing # 231372141 This authorization will remain in effect until 1 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: City, State, Zip: Phone Number: | Notification of \ | Withdrawal Authorization Change |
|--|--------------------------|---|
| 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: Sharon Bank Account # Bank Routing # 231372141 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: Address: City, State, Zip: | 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: Sharon Bank Account # Bank Routing # 231372141 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: City, State, Zip: | Account Number: | |
| City, State, Zip: Phone Number: Please cancel all automatic withdrawals from my old institution: Account # Bank Routing # Please make all future automatic withdrawals from my new institution: Financial Institution: Sharon Bank Account # Bank Routing # 231372141 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: City, State, Zip: | Payment Amount: | |
| 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: Sharon Bank Account # Bank Routing # 231372141 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: Address: City, State, Zip: | 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: Sharon Bank Account # Bank Routing # 231372141 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: Address: City, State, Zip: | City, State, Zip: | |
| Financial Institution: Account # Bank Routing # Please make all future automatic withdrawals from my new institution: Financial Institution: Sharon Bank Account # Bank Routing # 231372141 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: City, State, Zip: | Phone Number: | |
| Please make all future automatic withdrawals from my new institution: Financial Institution: Sharon Bank Account # Bank Routing # 231372141 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: City, State, Zip: | Please cancel all automa | atic withdrawals from my old institution : |
| Please make all future automatic withdrawals from my new institution: Financial Institution: Sharon Bank Account # Bank Routing # 231372141 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: City, State, Zip: | Financial Institution: | |
| Financial Institution: Account # Bank Routing # 231372141 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: City, State, Zip: | Account # | Bank Routing # |
| Account # Bank Routing # 231372141 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: City, State, Zip: | Please make all future a | utomatic withdrawals from my new institution: |
| 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: City, State, Zip: | Financial Institution: | Sharon Bank |
| you have been notified by me in writing that this authorization has been changed or revoked. Signature: Name: Address: City, State, Zip: | Account # | Bank Routing # 231372141 |
| Name: Address: City, State, Zip: | | |
| Address: City, State, Zip: | Signature: | Date: |
| City, State, Zip: | Name: | |
| | Address: | |
| Phone Number: | City, State, Zip: | |
| | 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.

| | lome I | Mortgage |
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____ Insurance

____ Cable/Internet

____ Gym/Club Memberships

____ Credit Cards

____ Investments

___ Subscriptions

_ Charity Donations





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Account Closure Authorization

You can authorize your remaining balance to be deposited automatically to your new Sharon 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.

| Notification of Account Closure Authorization | | | | |
|---|--|--|--|--|
| 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: | | | | |
| Place an X next to your desi | sit directly to my new account at Sharon Bank. | | | |
| Account # | Routing # 231372141 | | | |
| Please forwa | ard me a check to my address listed below. | | | |
| Primary Signature: | Date: | | | |
| Joint Signature: | | | | |
| Name: | | | | |
| Address: | | | | |
| City, State, Zip: | | | | |
| Phone Number: | | | | |

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 Sharon Bank!



