Making the switch is easy.

Have you thought about changing banks? If you’re like most people, then the answer is yes. Maybe you recently relocated, switched jobs or perhaps your bank just isn’t providing the customer service you deserve.

Regardless of the reason, you still haven’t switched. Why not? Because you probably think it’s too much trouble. With Bank of Albuquerque’s fast and easy “Switch Kit”, changing banks has never been easier.

Welcome to Bank of Albuquerque.
Five Easy Steps to Switch.

1) **Open your Bank of Albuquerque account.**
   Stop by a Bank of Albuquerque banking center, call us at 800-583-0709 or open your new account online at www.bankofalbuquerque.com. Make a note of your new Bank of Albuquerque account number and routing number. You’ll need them later.

   **Routing numbers and account numbers:**
   How to locate them on your checks:
   
   ![Routing Number and Account Number]

2) **Stop using your old account.**
   Let all your checks clear. This could take a few days. Destroy any unused checks, ATM/debit cards and deposit slips.

3) **Change direct deposits.**
   All the forms you need are in our Switch Kit. Simply fill out Form A and give it to your employer, the Social Security Administration or your retirement plan administrator. Include a new deposit slip or voided check.

4) **Change automatic payments.**
   Use Form B to change all automatic withdrawals deducted from your account. Once filled out, send Form B to all applicable merchants.

   Also, don’t forget to update automatic payments made on your old debit card with your new Bank of Albuquerque Visa Debit Card number and expiration date.

5) **Close your old account.**
   Complete Form C and send to your old bank to close the account and request a final check to be sent to you. If you have an account at more than one financial institution, complete a form for each.

   Send in Forms A, B and C and close your old account. And that’s it!

“Switch” Your Account Today.

Please make sure you have the most recent version of Adobe Acrobat.

Still have questions?

Stop by one of our local banking centers or call us at (800) 583-0709.
To Whom It May Concern:

Please change my direct deposit authorization to be deposited in my new Bank of Albuquerque account. My information is as follows:

Bank of Albuquerque **Routing Number:** 107006606

Bank of Albuquerque **Account Number:**

If you have any questions regarding this request please contact me at:

Phone: ________________________________  ☐ Day  ☐ Evening

Signature: ________________________________

Name *(Please Print)*: ________________________________

My Address: ________________________________

City, State, Zip: ________________________________

This form authorizes your deposits to be sent to the financial institution named above to be deposited to the designated account. Please complete a separate form for each type of pre-authorized deposit you currently have set up on the account you are closing.
**Please Change My Automatic Withdrawal Account Number:**

<table>
<thead>
<tr>
<th>Date:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Company Name:</td>
<td></td>
</tr>
<tr>
<td>Company Address:</td>
<td></td>
</tr>
<tr>
<td>City, State, Zip:</td>
<td></td>
</tr>
</tbody>
</table>

**To Whom It May Concern:**

I have recently changed my account to Bank of Albuquerque and I would like to change my automatic withdrawal authorization. **My information is as follows:**

Please withdrawal the follow amount from my account *(see below)*: $________________________

Previous Bank: ____________________________

Previous Routing Number: ____________________________

Previous Account Number: ____________________________

For *(Payment or Reason)*: ____________________________

On *(Date of Month)*: ____________________________

**Discontinue making withdrawals** from this account on: ____________________________

**Begin making future withdrawals** from my new Bank of Albuquerque account on: ____________________________

Bank of Albuquerque **Routing Number:** 107006606

Bank of Albuquerque **Account Number:** ____________________________

If you have any questions regarding this request please contact me at:

Phone: ____________________________ ☐ Day ☐ Evening

**Signature:** ____________________________

**Name** *(Please Print)*: ____________________________

My Address: ____________________________

City, State, Zip: ____________________________

This form authorizes your withdrawals to be sent to the financial institution named above to be withdrawn from the designated account. Please complete a separate form for each type of pre-authorized withdrawal you currently have set up on the account you are closing.
Please Close My Account(s):

**Personal Information**

Primary Account Holder First Name: ____________________________________________

Primary Account Holder Last Name: ____________________________________________

Daytime Phone Number: ______________________________________________________

Address: ___________________________________________________________________

City: ______________________________________________________________________

State: _____________________________________________________________________ Zip: __________________________

Please send any funds remaining in these accounts to:

The address shown above: ☐

The following address: ☐

Address: __________________________________________________________________

City: ______________________________________________________________________

State: _____________________________________________________________________ Zip: __________________________

Please close the following account(s) with your institution:

Account 1 Number: __________________________________________________________

Account 1 Type: ☐ Checking

☐ Savings

☐ Money Market

☐ Other

Account 2 Number: __________________________________________________________

Account 2 Type: ☐ Checking

☐ Savings

☐ Money Market

☐ Other

**Signature:** ________________________________________________________________

Name (Please Print or Type): __________________________________________________

Date: ______________________________________________________________________