

Join our Community of One



Moving your accounts to American Commerce Bank has never been easier. Please see the following guide for information necessary to complete each account activity.

Your American Commerce Bank Account Number _____
Routing Number: 061120453

To close an account and transfer remaining funds, you should:

- Maintain sufficient funds in your previous account to clear any outstanding checks or automatic withdrawals prior to closing the account completely.
- Double check maturity dates if transferring a Certificate of Deposit, in order to avoid possible penalties (you may need to provide original certificate).
- Have a recent bank statement with your previous account number(s).
- Complete the Account Closing Notification Form and present it to your previous bank to process.

To change your payroll or direct deposit, you should:

- Have a voided check from your American Commerce Bank account.
- Complete the Direct Deposit Request Form and present it to your employer to process.

To change your automatic payment or withdrawal, you should:

- Have a recent statement from the vendor.
- Complete the Automatic Payment Request Form and present it to the vendor.
- You must complete a separate form for each vendor that debits money from your account.

To discuss an existing loan, you should:

- Speak to a community banker at any of our branches.
- Provide a recent loan statement with loan account information and balance remaining.

To rollover a 401(k) or another retirement account, you should:

- Schedule an appointment with an American Commerce Bank Customer Service Representative.
- Have a recent account statement.
- Have contact information for your employer or former employer.

To change your Social Security Direct Deposit, you should:

- Schedule an appointment with an American Commerce Bank Customer Service Representative.
- Visit www.ssa.gov/deposit/howtosign.htm to change your deposit online, or print, complete, and mail the government's Standard Form 1199A to the Social Security Administration.

To establish your online banking service, you should:

- Visit americancommercebank.com and click "Log In" in the top right corner then select "Enroll Now" to access the "Online Banking Enrollment Form."
- Complete the requested information, then select "Next."
- Present this form to your banker or submit it by mail.
- Check e-mail for login information and instructions for accessing your new service.

We are ready to walk you through every step.



Member
FDIC


**American
Commerce Bank** N.A.

Join our Community of One Account Closing Notification



To:
Bank Name _____ Address _____
City, State _____ Zip Code _____

From:
Name(s) on account(s) _____ Address _____
City, State _____ Zip Code _____
Telephone Number _____ Social Security Number _____
E-mail Address: _____

Please accept this letter as authorization to close my account(s) with your institution.
Please close the account(s) listed below.

Account Number _____
____ Checking ____ Savings ____ Money Market ____ Certificate of Deposit

Account Number _____
____ Checking ____ Savings ____ Money Market ____ Certificate of Deposit

Account Number _____
____ Checking ____ Savings ____ Money Market ____ Certificate of Deposit

Please transfer any remaining funds in the accounts listed to:
American Commerce Bank (address) _____
City, State _____ Zip Code _____

Electronic Deposit Instructions:

- American Commerce Bank routing number : 061120453
- Deposit entire amount to checking account number: _____ OR
- Deposit \$ _____ to savings account number: _____ AND
the remainder to checking account number: _____.

I authorize:
- The listed entity to close the account(s) listed here.
- The transfer of my funds to my American Commerce Bank checking and/or savings account(s)
as indicated.
- American Commerce Bank to credit deposits to my account(s) as specified.

Signature _____ Date _____



Join our Community of One Direct Deposit Request



Please accept this letter as notification that I have established a new checking and/or savings account at American Commerce Bank. I would like my paycheck to be automatically deposited to my American Commerce Bank account(s) according to the instructions below.

Date: _____

To: Payroll Department

Employer/Company Name _____

From: _____

Social Security Number: _____

Subject: Payroll Direct Deposit

- Establish Direct Deposit
- Change my existing Direct Deposit

Deposit Instructions:

- Deposit entire amount to checking account number: _____ OR
- Deposit \$ _____ to savings account number: _____ AND
the remainder to checking account number: _____.

American Commerce Bank Routing Number: 061120453

I authorize:

- The listed entity to change deposits of my funds to my American Commerce Bank checking or savings account.
- American Commerce Bank to credit funds to my account(s),
- This authorization to remain in effect until I send written notice of change or cancellation.

Signature _____ Date _____



Join our Community of One Automatic Payment Request



Please accept this letter as notification that I have established a new checking and/or savings account at American Commerce Bank. I would like the following payment to be automatically debited from the American Commerce Bank account listed below.

- Establish Automatic Payment**
 Change my existing Automatic Payment

Automatic Payment Information:

Company Name _____ Address _____
City, State _____ Zip Code _____

Company Account Number _____

Payment Amount \$ _____

Monthly Bi-Weekly Weekly

First Payment Date _____

Client Personal Information:

Name _____ Mailing Address _____
City, State _____ Zip Code _____
Daytime Telephone Number _____ E-mail Address _____

Bank Account Information:

Account Type: Checking Savings
American Commerce Bank Account Number _____

American Commerce Bank routing number : 061120453

I authorize:

- The company listed to initiate withdrawal of my funds from the above American Commerce Bank account.
- American Commerce Bank to debit funds from my account for each payment presented.
- This authorization to remain in effect until I send written notice of change or cancellation.

Signature _____ Date _____

