



SWITCH KIT

Thank you for choosing Texas Republic Bank! We have developed this Switch Kit to assist you in the process of moving your banking relationship to Texas Republic Bank. Just follow the easy steps listed here. We have included some documents you can use to make moving your accounts to Texas Republic Bank even easier.

Your Texas Republic Banker will be happy to help you through this process – it's all part of **"Banking like it oughta be!"**

Simple Steps to Switch Your Account(s):

1. Open a new account at Texas Republic Bank.
 - a. Applications for both business and personal accounts are included in this kit.
 - b. Stop by any Texas Republic Bank office and we will help you choose the account that is right for you.
2. Stop using your old account.
 - a. Let all your checks clear.
 - b. Destroy any unused checks and deposit slips.
 - c. Destroy your debit or ATM card.
3. Change your direct deposits.
 - a. A Direct Deposit Change Request form is included in this kit to give to anyone making direct deposits into your account.
 - b. Include a voided check or deposit slip from your new Texas Republic Bank account with the form when you send it to your employer, Social Security, your retirement plan, or any other depositor.
4. Change all automatic payments and withdrawals.
 - a. An Automatic Payment/Withdrawal Change Request form is included in this kit to help you notify anyone making automatic withdrawals from your account.
 - b. Remember to include insurance drafts, gym dues, online services, and automatic utility payments, for instance.
 - c. If you have recurring payments set up through online banking or bill pay at your previous bank, be sure they are cancelled and entered in Texas Republic Bank's online banking.
5. Close your old account.
 - a. After all your checks have cleared and your automatic deposits and payments/ withdrawals have been transferred to Texas Republic Bank, you are ready to notify your previous bank to close your account.
 - b. A Bank Account Closing Request form is provided in this kit to help you notify your bank to close your account and send a check to Texas Republic Bank for deposit to your new account.

Please do not hesitate to let us know if we can help you in any way during this process.

Thank you for choosing Texas Republic Bank!





DIRECT DEPOSIT CHANGE REQUEST

To: _____
Name of Employer/Depositor

Address: _____

City: _____ State: _____ Zip: _____

I have recently opened a new account at Texas Republic Bank. I would like to change my direct deposit information as of _____ . *Effective Date*

Please STOP sending my automatic deposits to:

Previous Financial Institution Account Number

I hereby authorize you to redirect my future deposits to:

TEXAS REPUBLIC BANK , Frisco, Texas

ACH/ Transit Routing Number: 111924538

Account Number : _____

Type of Account: checking savings

If you have any questions, please contact me at () _____

Thank you,

Name: _____

Address: _____

City, State, Zip: _____

Signature: _____ Date _____

* Attach a voided deposit slip or check to this form.



CONSUMER DEPOSIT ACCOUNT APPLICATION

ACCOUNT NAME:
ACCOUNT ADDRESS:
Star Checking Shooting Star Checking Gold Star Savings Gold Star Money Market CD

ACCOUNT HOLDER INFORMATION

NAME: DATE OF BIRTH:
PHYSICAL ADDRESS:
HOME PHONE: CELL PHONE: WORK PHONE:
EMAIL ADDRESS:
DL NUMBER: STATE: ISSUE: EXP:
EMPLOYER: OCCUPATION:
SOCIAL SECURITY #: US CITIZEN: YES: NO:
SIGNATURE: DATE:

ACCOUNT HOLDER INFORMATION

NAME: DATE OF BIRTH:
PHYSICAL ADDRESS:
HOME PHONE: CELL PHONE: WORK PHONE:
EMAIL ADDRESS:
DL NUMBER: STATE: ISSUE: EXP:
EMPLOYER: OCCUPATION:
SOCIAL SECURITY #: US CITIZEN: YES: NO:
SIGNATURE: DATE:

MONTHLY ANTICIPATED ACCOUNT ACTIVITY:

Table with 4 columns: Average Balance (\$0-\$5,000, \$5,001-\$25,000, \$25,001-\$100,000, \$100,000+), # of Check Deposits, # of Check Withdrawals, # of Cash Deposits, # of Cash Withdrawals.

BANK USE ONLY

CUSTOMER # ACCT # BR # TRB REP: OFFICER:
OPENING DEPOSIT: SOURCE OF FUNDS: OPENING PROCESS:
PREVIOUS BANK: REFERRED BY: RISK RATING:
NEW CUSTOMER: YES NO EXISTING RELATIONSHIP: YES NO RELATED ACCTS:

ACCOUNT NAME: _____

CUSTOMER # _____ ACCT # _____

BENEFICIARY INFORMATION:

NAME: _____ DATE OF BIRTH: _____

PHYSICAL ADDRESS: _____

HOME PHONE: _____ CELL PHONE: _____ WORK PHONE: _____

EMAIL ADDRESS: _____ RELATIONSHIP: _____

BENEFICIARY INFORMATION:

NAME: _____ DATE OF BIRTH: _____

PHYSICAL ADDRESS: _____

HOME PHONE: _____ CELL PHONE: _____ WORK PHONE: _____

EMAIL ADDRESS: _____ RELATIONSHIP: _____

SECURITY QUESTIONS (Please choose a minimum of 3 questions)

- 1. What is your mother's maiden name? _____
- 2. What is your favorite pet's name? _____
- 3. Where is your birthplace? _____
- 4. What street did you grow up on? _____
- 5. Who was your best friend in high school? _____

REPLACEMENT QUESTIONS/ANSWERS

QUESTION: _____

ANSWER: _____

QUESTION: _____

ANSWER: _____

QUESTION: _____

ANSWER: _____

SIGNATURE: _____ DATE: _____



BUSINESS DEPOSIT ACCOUNT APPLICATION

ACCOUNT NAME: _____
 PHYSICAL ADDRESS: _____
 MAILING ADDRESS: _____
 PRIMARY CONTACT: _____ BUSINESS PHONE: _____
 IRS EIN: _____ ENTITY TYPE _____ NATURE OF BUSINESS: _____
 ___ Star Checking for Small Business ___ Star Checking ___ Shooting Star Checking for Sole Proprietor
 ___ Shooting Star Checking for Non-Profit ___ Gold Star Savings ___ Gold Star Money Market ___ CD

ACCOUNT HOLDER INFORMATION

NAME: _____ DATE OF BIRTH: _____
 PHYSICAL ADDRESS: _____
 HOME PHONE: _____ CELL PHONE: _____ WORK PHONE: _____
 EMAIL ADDRESS: _____
 DL NUMBER: _____ STATE: _____ ISSUE: _____ EXP: _____
 SOCIAL SECURITY #: _____ US CITIZEN: YES: _____ NO: _____
 SIGNATURE _____ DATE: _____

ACCOUNT HOLDER INFORMATION

NAME: _____ DATE OF BIRTH: _____
 PHYSICAL ADDRESS: _____
 HOME PHONE: _____ CELL PHONE: _____ WORK PHONE: _____
 EMAIL ADDRESS: _____
 DL NUMBER: _____ STATE: _____ ISSUE: _____ EXP: _____
 SOCIAL SECURITY #: _____ US CITIZEN: YES: _____ NO: _____
 SIGNATURE _____ DATE: _____

MONTHLY ANTICIPATED ACCOUNT ACTIVITY:

Average Balance: \$0-\$5,000	\$5,001-\$25,000	\$25,0001-\$100,000	\$100,000+
# of Check Deposits: 0-4 5-9 10+ Average Amount \$	# of Check Withdrawals: 0-4 5-9 10+ Average Amount \$		
# of Cash Deposits: 0-4 5-9 10+ Average Amount \$	# of Cash Withdrawals: 0-4 5-9 10+ Average Amount \$		

BANK USE ONLY

CUSTOMER # _____ ACCT # _____ BR # _____ TRB REP: _____ OFFICER: _____
 OPENING DEPOSIT: _____ SOURCE OF FUNDS: _____ OPENING PROCESS: _____
 PREVIOUS BANK: _____ REFERRED BY: _____ RISK RATING: _____
 NEW ENTITY: ___ YES ___ NO EXISTING RELATIONSHIP: ___ YES ___ NO RELATED ACCTS: _____

ACCOUNT NAME: _____

CUSTOMER # _____ ACCT # _____

I authorized all signers listed below to exercise all the powers listed below.

SIGNATURE: _____ DATE: _____

AUTHORIZATION POWERS GRANTED:

Attach one or more signers to each power by placing the number corresponding to their name on the line before the power.

1 _____
NAME AND TITLE

2 _____
NAME AND TITLE

3 _____
NAME AND TITLE

4 _____
NAME AND TITLE

5 _____
NAME AND TITLE

6 _____
NAME AND TITLE

_____ A) Open or close any share or deposit accounts in the entity's name

_____ B) Enter into and execute any preauthorized electronic transfer agreements

_____ C) Enter into and execute a commercial Wire Transfer Agreement on behalf of the entity

_____ D) Endorse and deposit checks

_____ E) Sign checks for the payment of money, withdrawal, or transfer of funds on behalf of the entity

_____ F) Enter into and execute a lock-box agreement or safe deposit box agreement

_____ I) Receive and acknowledge receipt of funds

_____ J) Amend, extend, or terminate any agreements with the Financial Institution on behalf of the entity

_____ K) Execute other agreements that may be required to fulfill the purposes of the Authorization

_____ L) Other: _____



Automatic Payment/Withdrawal Change Request

To Whom It May Concern:

This letter serves as a request to have my automatic payment/withdrawal from your organization transferred to my account with Texas Republic Bank. My information is as follows:

- Date _____
- Company* _____
- Identification Number _____
- Member Number _____
- Account Number _____

*Name of Company/Organization/Institution for which this change is being requested

Please redirect my automated payment/withdrawal to my new account with Texas Republic Bank as follows:

- Texas Republic Bank routing/transit number 111924538
- Texas Republic Bank account number * * _____

If you have any questions, please contact me at () _____

Thank you,

Name: _____

Address: _____

City, State, Zip: _____

Signature: _____ Date _____

* * Attach a voided check to this form.



Bank Account Closing Request

To Whom It May Concern:

This letter is my authorization to close the following account(s) with your Financial Institution. Please issue and mail a check with the balance and any accrued interest to:

Texas Republic Bank
 Attention: _____
 2595 Preston Road, Suite 100
 Frisco, Tx 75034

Closing Account Information
Name of Account Holder(s)

Closing Account Information
Name of Account Holder(s)
ure_ Date_ * Attach a voided deposit slip or check to this form. _____
Account Number _____ Account Type <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> CD <input type="checkbox"/> IRA

If you have any questions, please contact me at () _____

Thank you,

Name: _____
 Address: _____
 City, State, Zip: _____
 Signature: _____ Date _____