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 Oklahoma’s fast and easy “Switch Kit”, changing banks has never been easier.

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

1) Open your Bank of Oklahoma account.
Stop by a Bank of Oklahoma banking center, call us at 800-234-6181 or open your new account online at www.bok.com. Make a note of your new Bank of Oklahoma account number and routing number. You’ll need them later.

Routing numbers and account numbers:
How to locate them on your checks:

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 Oklahoma 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) 234-6181.
To Whom It May Concern:

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

Bank of Oklahoma Routing Number: 103900036

Bank of Oklahoma 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:

Date: __________________________________________

Company Name: __________________________________________

Company Address: __________________________________________

City, State, Zip: __________________________________________

To Whom It May Concern:

I have recently changed my account to Bank of Oklahoma 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 Oklahoma account on: __________________________________________

Bank of Oklahoma Routing Number: 103900036

Bank of Oklahoma 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: ___________________________________________________________________