



Evans National Bank

EAS-E SWITCH KIT

Welcome

At Evans National Bank, our goal is to be as valuable to you as you are to us. Simply put, we want to be your bank. So we are constantly looking to improve products, services and ways of meeting our customers' needs.

We also know changing banks is not done without due consideration. So, we've developed our EAS-E Switch Kit to guide you through the process of moving your accounts and taking advantage of the free and convenient Evans National Bank services such as Direct Deposit and online Bill Pay. A checklist is even included to make sure nothing is overlooked or forgotten. Remember additional help is as close as the nearest Bank branch or a phone call to our friendly Customer Service department at 716-926-2000 during normal business hours. A directory of branch and ATM locations can be found on our website at www.evansnationalbank.com.

Let's get started. It's as EAS-E as 1, 2, 3, 4!

1

Please turn to the page titled **EAS-E Switch Checklist**. Start here to make a list of the accounts or services that you will need to close, notify or reestablish. In the pages following you find the forms you'll need.

2

On the next page you'll find the **EAS-E Transfer Form**. Use it to request and authorize other financial institutions to close your account and to release your funds.

3

On page three, you'll find the **EAS-E Automatic Payment Deduction Form**. If you didn't already register for Online Banking with Bill Pay services, when you opened your account, go to www.evansnationalbank.com to do so. Then, use this form to discontinue automatic payment deductions from your old account and reestablish the payments from your new account. A complimentary demo is available on the website. Remember to attach a voided check.

4

Page four is the **Direct Deposit Sign-up Form** to use when requesting direct deposit into your Evans National Bank checking or savings account. Remember to attach a voided check.

That's all there is to it! It's that Eas-E and we hope you found our Eas-E Switch Kit helpful.

Evans National Bank is a member of the Evans Bancorp, Inc. (NASDAQ: EVBN) family of companies, which also includes Evans National Leasing, Inc and ENB Insurance Agency, Inc.

EAS-E SWITCH CHECKLIST

Form Name	Account Number	Account Type	Financial Institution	Mail On	Follow-up On	Completed
Account Closure Request						<input type="checkbox"/>
Account Closure Request						<input type="checkbox"/>
Account Closure Request						<input type="checkbox"/>
Automatic Payment Deduction						<input type="checkbox"/>
Automatic Payment Deduction						<input type="checkbox"/>
Automatic Payment Deduction						<input type="checkbox"/>
Direct Deposit Enrollment						<input type="checkbox"/>
Direct Deposit Enrollment						<input type="checkbox"/>
Direct Deposit Enrollment						<input type="checkbox"/>
Payroll Direct Deposit						<input type="checkbox"/>
Payroll Direct Deposit						<input type="checkbox"/>
Online Banking Account Set-up						<input type="checkbox"/>
Bill Pay Set-up						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>

Please remember to allow time for automatic deductions and direct deposit requests to be completed prior to closing your existing/previous accounts. Occasionally, this can take up to 1– 2 months.

EAS-E TRANSFER



Notice: This is my (our) written authorization to close the account(s) designated below. By signing this form I (we) authorize you to release the remaining funds in my (our) existing account(s) in the form of a cashier's check.

Include (Check all that apply)	Type of Account	Account Number
<input type="checkbox"/>	Checking	
<input type="checkbox"/>	Savings	
<input type="checkbox"/>	Certificate of Deposit <input type="checkbox"/> Upon Receipt <input type="checkbox"/> At Maturity	
<input type="checkbox"/>	Money Market	
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		

Please mail the check and confirmation of account closure to the following. Should you have questions, I (we) can be reached at the following phone numbers.

Name	Last First Middle Initial		
Street Address			
PO Box or Apt. Number			
City, State, Zip			
Daytime Phone Number	()	Evening Phone Number	()

Customer Signature (Primary)	X		
Date	/ /	Social Security Number	

Customer Signature (Secondary)	X		
Date	/ /	Social Security Number	

EAS-E AUTOMATIC PAYMENT DEDUCTION



Notice: I am closing my existing bank account from which you receive automatic payments. This form shall serve as written authorization to discontinue automatic payment deductions from my old account and to reestablish automatic payment deductions from my new account. A new voided check is attached.

Effective Date	/ /	New Bank	Evans National Bank
New Account Number		New Routing Number	022310121
Old Financial Institution		Old Account Number	

Customer Signature <i>(Primary)</i>	X	Social Security Number or Tax Payer ID Number	
Customer Name <i>(Please Print or Type)</i>		Date	/ /

Customer Signature <i>(Secondary)</i>	X	Social Security Number or Tax Payer ID Number	
Customer Name <i>(Please Print or Type)</i>		Date	/ /

Please send acknowledgement of request for reestablishment of automatic deduction to:

Name	Last First Middle Initial		
Street Address			
PO Box or Apt. Number			
City, State, Zip			
Daytime Phone Number	()	Evening Phone Number	()

EAS-E DIRECT DEPOSIT SIGN-UP



Use this form to request direct deposit into your Evans National checking or savings account. Direct deposit is easy and safe, plus you never have to worry about getting to the bank before closing.

1 Complete this form and attach a voided check to this form to confirm your account number and routing number.

2 Submit this completed form and voided check to the appropriate party.
For Payroll Deposits: Forward this form to your employer's payroll department.

Name	Last	First	Middle Initial
Social Security or Tax Payer ID Number			
Street Address			
PO Box or Apt. Number			
City, State, Zip			
Daytime Phone Number	()	Evening Phone Number	()

Include (Check all that apply)	Type of Account	Employee ID Number or Account Number
<input type="checkbox"/>	Payroll	
<input type="checkbox"/>	Retirement/Annuity	
<input type="checkbox"/>	Dividend	
<input type="checkbox"/>	Other:	

Notice: I hereby authorize _____ (name of company) and Evans National Bank to automatically deposit my check into the account listed below. This authorization will remain in effect unless I file a new authorization or until this authorization is revoked by me in writing.

Effective Date	/ /	Account Type	
New Evans National Bank Account Number		New Evans National Bank Routing Number	022310121
Name on Account	Last	First	Middle Initial
Customer Signature	X		