

Account Tracking Worksheet

This form offers a quick and easy way to log, monitor and track your status while transitioning your account to OceanFirst Bank. Please use this to account for all deposits into your account along with any debits out of your account. There is even a section to track any outstanding checks.

Safety Tip: Make sure to keep all sensitive account information secure and, if printed, consider shredding this worksheet upon completion. Also consider and exercise caution when transmitting documents via email as it may not be a secure form of communication.

OFBChecking account opened?

New OceanFirst Account Number	
New OceanFirst Routing Number	231270353

Deposits "IN"	Institution	Account #	Amount	Date	Updated ✓
Employer Payroll					
Social Security					
Pension/Retirement					
Investment					
Other:					
Other:					

Debits "OUT"	Institution	Account #	Amount	Date	Updated√
Home/Auto Insurance					
Utilities (Gas/Electric)					
Phone					
Cable					
Mortgage					
Auto Loan					
Credit Card(s)					
Other:					
Other:					

Use this section to track any one-time payments still pending

Outstanding Check Number	Payable to	Amount	Bank/Account check was written from	Date Check Cleared







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IMPORTANT: Please do not close the account at your former bank until you have verified a direct deposit transfer has been made into your new **OceanFirst Bank** account.

Use this form to notify your employer, (or any other organization that regularly sends a payment to you), that you want the proceeds deposited into the **OceanFirst Bank** accounts specified below.

Authorization for Direct Deposit

Employer/Organization Name

Employer/Organization Address

Name of Previous Bank

Account Number

I hereby authorize, _________ (company/organization name), to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit error to my account(s) indicated below and the depository institution named below, to credit and/or debit the same to such account.

Primary Account

OceanFirst Bank Bank Name

Account Number

231270353 Routing Number

Equal Opportunity Lender

Equal Housing Lender

Amount to Deposit







IMPORTANT: Please do not close the account at your former bank until you have verified an automatic payment has been made from your new **OceanFirst Bank** account.

Complete this form and mail it along with a voided check or voided deposit slip from your **OceanFirst Bank** account, to the companies or organizations you have authorized to make withdrawals from your account.

Authorization to Change Automatic Payment

I have closed my checking account at:

Please print name of financial institution

Effective date of the account closing

Name on account

Social Security Number

Old account number

I hereby authorize automatic payment from my new checking account at OceanFirst Bank, 975 Hooper Ave, Toms River, NJ 08753.

Company to receive this form

Company address to receive this form

My/our account number at this company

231270353 My new Bank ABA routing number

My new account number

My/our Signature(s)

Daytime phone number

Date



Member FDIC





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Request to Close Account Notice

Please close the account(s) indicated below and mail me the balance, including any accrued interest to: Me, at the address indicated below Street: State: Zip: Account Number: Checking Account Account Number: Account Number: Authorization I hereby authorize the closing of my checking account. All my checks have cleared the account to be close and all the direct deposits and automatic payments have been stopped. Signature: Joint Owner: Savings/Money Market Account Number: Authorization	
Street: Zip: State: Zip: Account Number: All transactions have cleared the account(s) and all direct deposits and/or automatic payments have been stop Checking Account Account Number: Account Number: I hereby authorize the closing of my checking account. All my checks have cleared the account to be close and all the direct deposits and automatic payments have been stopped. Signature: Joint Owner: Savings/Money Market Account Number:	interest to:
State: Zip: Account Number: All transactions have cleared the account(s) and all direct deposits and/or automatic payments have been stop Checking Account Account Number: Authorization I hereby authorize the closing of my checking account. All my checks have cleared the account to be close and all the direct deposits and automatic payments have been stopped. Signature: Joint Owner: Account Number:	below
Account Number:All transactions have cleared the account(s) and all direct deposits and/or automatic payments have been stop Checking Account Account Number:Authorization I hereby authorize the closing of my checking account. All my checks have cleared the account to be close and all the direct deposits and automatic payments have been stopped. Signature: Joint Owner: Savings/Money Market Account Number:	
All transactions have cleared the account(s) and all direct deposits and/or automatic payments have been stop Checking Account Account Number:	
Checking Account Account Number:	
Account Number:	ave been stopped.
I hereby authorize the closing of my checking account. All my checks have cleared the account to be close and all the direct deposits and automatic payments have been stopped. Signature:	
Joint Owner:Savings/Money Market Account Number:	
Savings/Money Market Account Number:	
Account Number:	
Account Number:	
I hereby authorize the closing of my savings/money market account for the principal balance plus a accrued interest due.	
Signature:	
Joint Owner:	
CD	
Account Number:	
Joint Owner:	







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