## Making the switch to better banking today!

You can make the move to Community State Bank in three easy steps. Everything you'll need is provided in this handy Switch Kit. We can't wait to welcome you to Community State Bank, where you'll enjoy a better experience for all your banking needs!

1

### Open your new account.

Apply online in minutes or visit your local branch to open your new Community State Bank

2

Switch your direct deposits and automatic withdrawals.

If you have any automatic transactions, use the provided forms to seamlessly switch them to Community State Bank.

3

## Close your old account.

Now you're ready to switch. Simply fill out the provided form to close your old account. Any remaining account balance will be transferred to Community State Bank.





#### Page 2 of 4

# **Direct Deposit Authorization**

You can use your keyboard to fill out this form online, or you can print the form and complete it by hand.

Use this form to authorize your employer, retirement and pension funds, or any other agency to deposit your payment directly into your Community State Bank account. Use one form for each direct deposit.

Notification of Dir	ect Deposit Aut	norization Cha	ange
Company or Employer:			
Address:			
City, State, Zip:			
Phone Number:			
Employee ID: (if applicable)			
Effective immediately, p	please deposit the net ar	nount of my check to	my Community State
Bank account. I authoriz	ze (name of depositor)		
to automatically deposi	it funds into the account	below. This authorize	ation shall remain in
place until I have submi	itted a new authorization	n, or until this authori	zation is changed or
revoked by me in writin	ıg.		
Place an X next to your d	esired option.		
Net amount	to Community State Ban	k CHECKING	
Account #		Routing #	063106352
Net amount	to Community State Ban	k SAVINGS	
Account #		Routing #	063106352
Signature:			Date:
Name:			
Address:			
City, State, Zip:			
Phone Number:			

### **Direct Deposit Checklist:**

Use this list to remember all your direct deposits you need to transfer. These are the most common direct deposits.

n	
Pav	/rol
 ·	, , ,

lnv				
ши	COL	988	CII	u.



\_\_\_\_ Social Security





#### Page 3 of 4

## **Automatic Withdrawal Authorization**

You can use your keyboard to fill out this form online, or you can print the form and complete it by hand.

Use this form to authorize a change to any automatic payment, deductions, or withdrawals from your account. Use one form for each automatic withdrawal. Or, many companies and agencies make it easy to change your account on record online on their website.

Notification of W	ithdrawal Autho	orization Char	nge
Name of Company:			
Account Number:			
Payment Amount:			
Address:			
City, State, Zip:			
Phone Number:			
Please cancel all automa	atic withdrawals from <b>m</b> y	old institution:	
Financial Institution:			
Account #		Bank Routing #	
Please make all future a	utomatic withdrawals fro	om <b>my new institutic</b>	on:
Financial Institution:	Community State Bank	K	
Account #		Bank Routing #	063106352
This authorization will remayou have been notified by r		•	anged or revoked.
Signature:			Date:
Name:			
Address:			
City, State, Zip:			
Phone Number:			

## Automatic Withdrawal Checklist:

Use this list to remember all your automatic payments you need to transfer. These are some of the most commonly used automatic payments.

=	ome l	M	IOn	നമനമ
		W	יוטו	LEAST

Auto	

		63	ш		ies
	u			ш	

neu	ran	$\sim$
Insu	ıaıı	レロ

へ - I-			4
ıar	/ שוו	'Inter	net
 oar	$\mathcal{I} \cup \mathcal{I}$	HILLOI	1101

$\sim$	101	I I N	A 1	l l	
(-)	vm/ul	א מווו	/IPMI	bersh	ıns
u		ub n			1DJ

$\sim$		-11	Λ-·	
( , l	æ	П	Caı	m

In۱	est	rm	ıΔr	ıtc
ΠIV	บอ		CI	ше

Cul	bscriptions
الان	

\_\_\_ Charity Donations





## **Account Closure Authorization**

Page 4 of 4

You can authorize your remaining balance to be deposited automatically to your new Community State Bank account(s) or paid by a check forwarded to your mailing address.

Use this form to close your account(s) at your former financial institution. Be sure to verify any outstanding items have cleared your old account.

Notification of A			
To Whom It May Concer	n:		
Financial Institution:			
Address:			
City, State, Zip:			
Please close my account	:		
Account Number:		Primary Owner:	
Address:			
City, State, Zip:			
Please send the remaini	ng balance to:		
Please send the remaini Place an X next to your des Please depor	ng balance to:	•	
Please send the remaini  Place an X next to your des  Please depos  Account #	ng balance to: ired option.	Routing #	
Please send the remaini  Place an X next to your des  Please depos  Account #	ng balance to: ired option. sit directly to my new ac	Routing #	
Please send the remaini  Place an X next to your des  Please depos  Account #	ng balance to: ired option. sit directly to my new ac	Routing # dress listed below.	
Please send the remaini  Place an X next to your des  Please depos  Account #  Please forwa	ng balance to: ired option. sit directly to my new ac	Routing # dress listed below.	063106352
Please send the remaini  Place an X next to your des  Please depos  Account #  Please forwa  Primary Signature:	ng balance to: ired option. sit directly to my new ac	Routing # dress listed below.	063106352
Please send the remaini  Place an X next to your des  Please depor  Account #  Please forwa  Primary Signature:  Joint Signature:	ng balance to: ired option. sit directly to my new ac	Routing # dress listed below.	063106352
Please send the remaini  Place an X next to your des  Please depor  Account #  Please forwa  Primary Signature:  Joint Signature:  Name:	ng balance to: ired option. sit directly to my new ac	Routing # dress listed below.	063106352

### **Congratulations!**

You had to sign your name a few times...but submitting these forms completes your switch to a truly better banking experience. We can't wait to show you the difference a local partner makes.

Welcome to Community State Bank!



