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 account(s).

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.





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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 D	irect Deposit Au	uthorization C	hange
Company or Employer:			
Address:			
City, State, Zip:			
Phone Number:			
Employee ID: (if applicable)			
Effective immediately, p	lease deposit the net ar	mount of my check t	o my Community State
Bank account. I authoriz	e (name of depositor)		
to automatically deposit	funds into the account	below. This authoriz	ration shall remain in
place until I have submit	tted a new authorization	n, or until this autho	rization is changed or
revoked by me in writing			
Place an X next to your de	esired option.		
Net amount	to Community State B	ank CHECKING	
Account #		Routing #	074912645
Net amount	to Community State B	ank SAVINGS	
Account #		Routing #	074912645
Signature:		ı	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.

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Investment	

____ Retirement Plans

___ Social Security





Automatic Withdrawal Authorization

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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 \	Withdrawal Authorization Change
Name of Company:	
Account Number:	
Payment Amount:	
Address:	
City, State, Zip:	
Phone Number:	
Please cancel all automa	atic withdrawals from my old institution :
Financial Institution:	
Account #	Bank Routing #
Please make all future a	utomatic withdrawals from my new institution:
Financial Institution:	Community State Bank
Account #	Bank Routing # 074912645
	nain in effect until I have submitted to you a new authorization, or until me in writing that this authorization has been changed or revoked.
Signature:	Date:
Name:	
Address:	
City, State, Zip:	
City, State, Zip.	

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.

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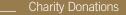
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Account Closure Authorization

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 Account Closure Authorization						
To Whom It May Conce	ern:					
Financial Institution:						
Address:						
City, State, Zip:						
Please close my accour	nt:					
Account Number:		Primary Owner:				
Address:						
City, State, Zip:						
oity, otate, zip.						
Please send the remaining balance to:						
Place an X next to your desi	ired option.					
Please depo	sit directly to my new a	account at Commun	ity State Bank.			
Account #		Routing #	074912645			
Please forward me a check to my address listed below.						
Primary Signature:			Date:			
Joint Signature:						
Name:						
Address:						
City, State, Zip:						
Phone Number:						

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!



