



**FIRST STATE**  
**BANK & TRUST**  
COMPANY, INC.

## Switching to First State Bank & Trust Co., Inc. is as easy as 1-2-3!

1. **Close Your Old Accounts.** Our Close Account Form is ready for you to fill in the blanks and sign. It notifies your old bank about the accounts you are closing and gives directions for disbursement of any remaining funds. If you have electronic bill payment at your old bank, bring us the list of your payees and we'll help you set them up.
2. **Set Up Your Direct Deposits.** Simply send our Direct Deposit Authorization Form to your employer or other payment source, so your funds can be quickly and automatically deposited to your accounts each pay period. And, if you already have your Direct Deposit going elsewhere, you can simply switch it to your First State Bank account.
3. **Switch Over Automatic Payments.** Fill out and sign the Direct Pay Worksheet and send it to each of your payees to switch any automatic payments so they'll come out of your new First State Bank account.

First State Bank is proud to have you as a new customer! This Switch Kit will save you time and hassle by providing information during your switch. If you should have any questions, please feel free to call us at 800-877-3728.

# CLOSE ACCOUNT FORM

Closing your checking and/or savings account(s) or online bill pay at your current bank may require that you use specific forms that they have designed. Please fill out the information listed below and submit to the bank where you are closing the account.

(Please print)

Financial Institution's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

To Whom It May Concern:

Effective \_\_\_\_\_, please close the following account(s) and send a check  
(date)  
for the remaining balance(s) to me at the address on file.

Primary Checking Account Number: \_\_\_\_\_

Secondary Checking Account Number: \_\_\_\_\_

Savings Account Number: \_\_\_\_\_

Additional Savings Account Number \_\_\_\_\_

If you have questions about this request, please contact me during the day/evening at

\_\_\_\_\_.

Signature(s) \_\_\_\_\_

\_\_\_\_\_

Date \_\_\_\_\_

# Direct Deposit Authorization Form

Fill in the information below and bring the completed form along with a voided check from your First State Bank & Trust Co., Inc. account to your company's payroll department.

(please print)

Company Name \_\_\_\_\_

Employee Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Social Security # \_\_\_\_\_ Date of Birth \_\_\_\_\_

Bank Routing # 081517907 Phone Number \_\_\_\_\_

My First State Bank & Trust Co., Inc. Checking Account # \_\_\_\_\_

I hereby authorize and request you to: Deposit my pay each pay period, effective immediately, and begin depositing to the above account number at First State Bank & Trust Co., Inc.

Additional Direct Deposit to:

CKG / SAV Account # \_\_\_\_\_ Amount \_\_\_\_\_  
(circle one)

CKG / SAV Account # \_\_\_\_\_ Amount \_\_\_\_\_  
(circle one)

Signature of employee \_\_\_\_\_ Date \_\_\_\_\_

If you receive a Social Security or Government Check, the easiest way to enroll in Direct Deposit or switch a Direct Deposit is to call the number below:

For Social Security/SSI Checks: 1-800-772-1213 For Veterans Benefits: 1-800-827-1000

# Direct Pay Worksheet

To add or change direct payments or transfers from your old account, you'll need to contact each payee. To make that process easier and ensure you have all the required data ready, fill in the information below before contacting payees.

(please print)

Your Name \_\_\_\_\_ SSN \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Some payees may be able to set up recurring payments and transfers using your First State Bank & Trust Co., Inc. Debit Card number and expiration date. This is the easiest way to make recurring payments and transfers.

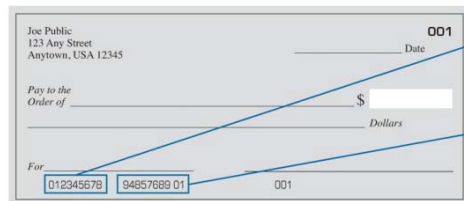
Your First State Bank & Trust Co., Inc. Debit Card number and expiration date can be found on the front of your card.

Your First State Bank & Trust Co., Inc. Debit Card Number \_\_\_\_\_

Your First State Bank & Trust Co., Inc. Debit Card Expiration Date \_\_\_\_\_

Other payees will require that you provide your First State Bank & Trust Co., Inc. account number and our bank routing number. Both numbers can be found on a First State Bank & Trust Co., Inc. check.

See sample below:



Your First State Bank & Trust  
Routing Number

08157907

Your First State Bank & Trust  
Account Number

## Fill out the information below before contacting payees:

(check one) Add Change

**Payee Name** \_\_\_\_\_

Account Number with Payee \_\_\_\_\_ Web

Address \_\_\_\_\_ Phone Number \_\_\_\_\_

(check one) Add Change

**Payee Name** \_\_\_\_\_

Account Number with Payee \_\_\_\_\_ Web

Address \_\_\_\_\_ Phone Number \_\_\_\_\_

**Be sure to contact your payees once you complete this form.**