Getting Started

Making the switch to better banking today!

You can make the move to First 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 First State Bank, where you'll enjoy a better experience for all your banking needs!



Open your new account.

Apply online in minutes or visit your local branch to open your new First State Bank account(s).

Switch your direct deposits and automatic withdrawals.

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

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 First State Bank.





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 First State Bank account. Use one form for each direct deposit.

Notification of Direct Deposit Authoriz	ation Change	Direct Deposit Checklist:
Company or Employer:		Use this list to remember all your direct deposits you need
Address:		to transfer. These are the most common direct deposits.
City, State, Zip:		Payroll
Phone Number:		Investments
Employee ID:		Retirement Plans
(if applicable)		Social Security
Effective immediately, please deposit the net amount of	of my check to my First State Bank	
account. I authorize (name of depositor)		
to automatically deposit funds into the account below.	This authorization shall remain in	
place until I have submitted a new authorization, or un	til this authorization is changed or	
revoked by me in writing.		
Place an X next to your desired option.		
Net amount to First State Bank CHECKING		
Account #	Routing # 103102193	
Net amount to First State Bank SAVINGS		
Account #	Routing # 103102193	
Signature:	Date:	
Name:		
Address:		
City, State, Zip:		
Phone Number:		





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 W	/ithdrawal Authorizati	ion Chang	ge		matic Withdrawal klist:
Name of Company:					his list to remember all your
Account Number:				autom	atic payments you need to
Payment Amount:					er. These are some of the commonly used automatic ents.
Address:				payme	
City, State, Zip:					Home Mortgage
Phone Number:					Auto Loans
i none reamber					
Please cancel all automa	atic withdrawals from my old ins	stitution			Insurance
Financial Institution:				_	Cable/Internet
	Duit				Gym/Club Memberships
Account #	Bank	k Routing #		_	Credit Cards
Please make all future a	utomatic withdrawals from my n	new institution		_	Investments
Financial Institution:	First State Bank			_	Subscriptions
Account #	Banl	k Routing #	103102193		Charity Donations
Account #	Danr	κ mouting π	103102193		
	in in effect until I have submitted to ne in writing that this authorization				
Signature:		D	oate:		
Name:					
Address:					
City, State, Zip:					
Phone Number:					





Account Closure Authorization

You can authorize your remaining balance to be deposited automatically to your new First State Bankaccount(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		Congratulations!
To Whom It May Concer Financial Institution: Address:		You had to sign your name a few timesbut submitting these forms completes your switch to a truly better banking experience. We can't wait to show you the difference a
City, State, Zip:		local partner makes. Welcome to First State Bank!
Please close my account	:	
Account Number:	Primary Owner:	
Address:		
City, State, Zip:		
Please send the remaining Place an X next to your des Please depos		
Account #	Routing # 103102193	
Please forwa	rd me a check to my address listed below.	
Primary Signature:	Date:	
Joint Signature:		
Name:		
Address:		
City, State, Zip:		
Phone Number:		



