

# Switch Kit

Our purpose at American State Bank is to help our customers achieve their dreams. These days we all have busy lives, so here at American State Bank we are always looking for ways to make banking with us easy and convenient. The American State Bank Switch Kit is just one more way we are working to make your life simple.



Follow the five easy steps in the American State Bank Switch Kit and put some light into your banking!





## We Are Here to Assist You!

#### **Step 1: Bring the Following:**

Bring photo I.D., and Social Security card, or documentation for Social Security #

#### Step 2: Open an American State Bank Checking Account!

See a Customer Service Representative at one of our three convenient locations. They will help determine what account(s) fits you best.

To make the process even faster have the New Deposit Consumer Account Application filled out when you come in to open your American State Bank Checking account.

#### **Step 3: Stop Using Your Previous Checking Account.**

Allow time for outstanding checks to clear. Destroy your ATM and/or Debit Cards, and unused checks and deposit slips.

#### **Step 4: Move Your Direct Deposit(s) to American State Bank**

Use the Direct Deposit Request to make this process even easier!

### **Step 5:** Transfer Any Automatic Payments and Debits to American State Bank

Use the Automatic Payment Request to assist you in quickly making the switch.

#### **Step 6: Close Your Previous Checking Account.**

Close your previous checking account. Use the Account Closing Request to close your previous checking account.



#### American State Bank

#### **New Deposit Consumer Account Application**

Please provide your current Driver's License or other picture ID and Social Security Card at opening.

Type of Account Applying For:				
Checking	Savings	ATM (	ATM Card	
Internet Banking	Telephone Banking	Debit	Debit Card	
I Would Like More Information On:				
American State Bank Cred	lit Card Safe Dep	osit Box		
Home Mortgage	Personal	Loan		
American State Bank Plus	ogram Financial Planning and Investments			
Where is the source of funds from to open	the account?			
Who referred us to you?				
Refer A Friend:				
Individual Applicant Information  Name (First, Middle, Last)  Pirth Data: / / Hama Talanh				
Birth Date: / / Home Teleph				
Are you a US Citizen?				
Driver's License No./Passport No.	Social	Security No		
Address:	City	State	Zipcode	
	•	Length of Employment:		
Employer Address:Street	City	State	Zipcode	
Employer Information:	•		·	
Telephone No.		Position/Title/Occupat	ion	
Joint Applicant Information  Name (First, Middle, Last)				
Birth Date: / / Home Teleph		ell No		
Are you a US Citizen?				
Driver's License No./Passport No	Social Security No.			
Address:Street	City	State	Zipcode	
Employer:			·	
Employer Address:Street	City	State	Zipcode	
Employer Information:		Position/Title/Occupat	ion	
I certify that everything I have stated in this applicate approved. By signing below I authorize you to check credit report on me. I also authorize you to answer que credit information at your request if my financial cond	my credit account and employment history uestions other may ask abou my credit reco	and/or have a credit reporting	ng agency prepare a	

Date

Joint Applicant's Signature

Date

Applicant's Signature



#### **New Deposit Request Instructions**

#### **Direct Deposits**

After you've identified the Direct Deposit from your previous bank statements, use the Direct Deposit Request to notify the depositor of your new bank information.

#### **Before Sending the Direct Deposit Request**

- 1: Check with your employer or source of income to make sure no other forms are required. For Social Security direct deposit, call the Social Security Administration at 1-800-772-1213 or fo to <a href="https://www.ssa.gov/deposit/howtosign.htm">www.ssa.gov/deposit/howtosign.htm</a>
- 2: Use the enclosed form to establish your direct deposit at American State Bank by providing it to your employer/source of income.
- Maintain the account at your previous bank until you have confirmed that your Direct Deposit(s) has been switched to your American State Bank account.

#### **After Sending the Direct Deposit Request**

- **1:** Confirm with your employer/source of income that forms were received.
- Monitor your account through the American State Bank Telebank service or online at <a href="https://www.americanstatebank.com">www.americanstatebank.com</a>

#### **Examples of Direct Deposit**

- Paycheck from Employer
- Social Security
- VA Compensation
- Retirement/Pension Plan
- Interest Income
- Dividends
- Military Pay



#### **Direct Deposit Request**

Company Name		American State Bank		
Address		Switch Kit		
City, State, Zip		2000000 1 400		
RE: Switching M	ly Direct Deposit To A	New Account		
ATTN:				
	· · · · · · · · · · · · · · · · · · ·	/ direct deposit. Please discontinue my new American State Bank account.		
· · · · · · · · · · · · · · · · · · ·	s regarding this request, please con ank you for your prompt assistance	ntact me by mail or call me at the phone e in this matter.		
Sincerely,				
Authorized Signature		Date		
Direct Deposit Info	ermation:			
Name	Social Security	y Number or Employee Number		
Address	City/State	Zip		
Phone: Day Evening (circle one)				
Old Bank Name	Routing Number			

Amount Deposited (Enter Deposit Amount or "Total Deposit")

Amount Deposited (Enter Deposit Amount or "Total Deposit")

Account Number

073922403

Routing Number

Account Number

New Bank Name

Account Number

American State Bank



## Automatic Payment Request Instructions

#### **Automatic Payments**

After you've identified the Automatic Payments from your previous bank statements, use the Automatic Payment Request to notify the merchant of your new bank information.

Don't forget you can also manage your payments with American State Bank's Internet Banking and Online Bill Pay. It's *FREE* with American State Bank Checking!

#### **Before Sending the Direct Deposit Request**

- 1: Identify any existing automatic payments.
- 2: Use the enclosed form to request that your automatic payment be established at American State Bank.
- 3: Maintain the account at your previous bank until you have confirmed that the automatic payment has been switched to your American State Bank account.



#### **Automatic Payment Request**

Company Name			rican State Bank	
Address		Switch Kit		
City, State, Zip				
RE: Changing M	y Automatic P	ayment		
ATTN: Accounts Re	eceivable/Accoun	ting		
I have recently changed changed to my new acc		o have my automatic payr	nent with your company	
Please discontinue my o American State Bank ac		pegin making automatic v	vithdrawls from my new	
, ,		, please contact me by ma t assistance in this matter.	,	
Sincerely,				
Authorized Signature		Date		
Automatic Paymer	nt Information:			
Name	_	Phone: Day Evening (circle one)		
Address		City/State	Zip	
Amount Debited (Enter payment am	ount or "amount due")			
Old Bank Name	Routing Number	Account Numl	ber	
Payment or Reason	Date of Payment			

073922403

Routing Number

Account Number

American State Bank

New Bank Name



## Account Closing Request Instructions

#### **Before Sending the Account Closing Request**

- **1:** Check with your previous bank to make sure no additional forms or information are required.
- 2: Inquire about any possible penalties with respect to early withdrawal before you close your account. If you have Certificate of Deposit (CD's), it is important to check the maturity dates.
- 3: Be sure that all automatic transactions have switched to your American State Bank account before closing your old account.

#### **After You've Sent the Account Closing Request**

1: Check account statements to verify that all accounts have a zero balance and have been closed.



#### **Account Closing Request**

Bank Name		an State Bank	
Address	Swit	ch Kit	
City, State, Zip			
RE: Close My Accounts			
ATTN: Account Maintenance			
This letter is to inform you I am closing account(s) listed below and send a check	-	•	
If you have any questions regarding this number listed below. Thank you for your p		ing or at the phone	
Sincerely,			
Authorized Signature	Date	_	
Automatic Payment Information	:		
Account #1			
Account #2			
Account #3			
	Phone: Day Evening (circle one)		
Address	City/State	Zip	