

# Making the switch to better banking today!

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

 $\mathbf{1}$ 

### Open your new account.

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





# **Direct Deposit Authorization**

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

When you have completed this form, take it or mail it to your employer's payroll department or other income source. Contact your employer or other income source to make sure no other special forms are required.

Notification of Dir	ect Deposit	t Authoriz	zation C	hange
Company or Employer:				
Address:				
City, State, Zip:				
Phone Number:				
Employee ID: (if applicable)				
Effective immediately, plea	ase deposit the n	et amount of	my check t	to my Alden State Bank
account. I authorize (name	e of depositor)			
to automatically deposit fu	unds into the acc	ount below. T	his authoriz	zation shall remain in
place until I have submitte	ed a new authoriz	zation, or unt	il this autho	rization is changed or
revoked by me in writing.				
Place an X next to your desi	ired option.			
Net amount to	o Alden State Ba	nk CHECKIN	G	
Account #			Routing #	022309611
Net amount to	o Alden State Ba	nk SAVINGS		
Account #			Routing #	022309611
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.

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Investment	









# **Authorization to Change Automatic Payments**

Page 3 of 4

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

Use this form to authorize a change to any automatic payments from your account. Use one form for each automatic payment. Or, many companies and agencies make it easy to change your account on record online on their website. Contact each company to ask if you need to provide any other information and to verify where to send this request.

Notification of F	Payment Authoriza	ation Chang	e
Name of Company:			
Account Number:			
Payment Amount:			
Address:			
City, State, Zip:			
Phone Number:			
Please <b>discontinue</b> my a	automatic payments from th	ne following accou	nt:
Financial Institution:			
Account #	E	Bank Routing #	
Please make all <b>future</b> a	utomatic payments from th	ne following accou	nt:
Financial Institution:	Alden State Bank		
Account #	E	Bank Routing #	022309611
Thank you very much			
Thank you very much This authorization will rem you have been notified by	nain in effect until I have sub me in writing that this authon nation of when the change wil	rization has been c	
Thank you very much This authorization will rem you have been notified by	nain in effect until I have sub me in writing that this author	rization has been c	
Thank you very much This authorization will rem you have been notified by send me a written confirm	nain in effect until I have sub me in writing that this author	rization has been c	hanged or revoked. Pleas
Thank you very much This authorization will rem you have been notified by send me a written confirm Signature:	nain in effect until I have sub me in writing that this author	rization has been c	hanged or revoked. Pleas
Thank you very much This authorization will rem you have been notified by send me a written confirm Signature: Name:	nain in effect until I have sub me in writing that this author	rization has been c	hanged or revoked. Pleas

# 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.

loma	Mortgage
	IVIUILEAEC

	o Loans

			es

\_\_\_\_ Insurance

\_\_\_\_ Cable/Internet

\_\_\_\_ Gym/Club Memberships

\_\_\_\_ Credit Cards

\_\_\_\_ Investments

\_\_\_\_ Subscriptions

\_\_\_\_ Charity Donations





#### Page 4 of 4

# **Account Closure Authorization**

You can authorize your remaining balance to be deposited automatically to your new Alden 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	Account Closure Authorization
To Whom It May Conce	rn:
Financial Institution:	
Address:	
City, State, Zip:	
Please close my accour	nt:
Account Number:	Primary Owner:
Address:	
City, State, Zip:	
Account #	
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 will complete your switch to a truly better banking experience. We can't wait to show you the difference a local partner makes.

Welcome to Alden State Bank!



