# 

### **Making the switch!**

You can make the switch to *Citizens Bank Minnesota* in four easy steps. Everything is provided in this Switch Kit. We are excited to welcome you to *Citizens* and Deliver the Ultimate Experience!

1

### Open your new account.

Apply online in minutes at www.citizensmn.bank or visit your local branch to open your new *Citizens Bank Minnesota* account(s).

2

### Switch your direct deposits.

If you have any direct deposits, use the Direct Deposit Authorization form to seamlessly switch them to Citizens Bank Minnesota.

### **Direct Deposit Checklist:**

Use this list to remember all your direct deposits you need to transfer. These are the most common direct deposits.

- \_\_ Payroll
- \_\_ Investments
- Retirement Plans
- Social Security

3

# Switch your automatic withdrawals.

If you have any automatic transactions, use the Automatic Withdrawal Authorization form to seamlessly switch them to *Citizens Bank Minnesota*.

4

### Close your old account.

Now you're ready to switch. Simply fill out the Account Closure Authorization form to close your old account. Any remaining account balance will be transferred to *Citizens Bank Minnesota*.

# Automatic Withdrawal Checklist:

These are some of the most commonly used automatic payments.

- \_\_\_ Home Mortgage
- \_\_ Auto Loans
- Utilities
- Insurance
- \_\_ Cable/Internet
- \_\_ Gym/Club Memberships
- \_\_ Credit Cards
- \_\_\_ Investments
- \_\_ Subscriptions
- \_\_ Charity Donations



## **DIRECT DEPOSIT AUTHORIZATION**

You can use your keyboard to fill out this form online and print it once completed, or you can print the form and complete it by hand. Use one form for each direct deposit.

Company or Employer:	
Address:	
City, State, Zip:	
Phone Number:	
Employee ID:(if applicable)	
Effective immediately, I authorize (name of depositor)to automatically deposit funds into the account below.	
Place an X next to your desired option.	
Net amount to <i>Citizens Bank Minnesota</i> CHECKII Account #	NG Routing #091901192
Net amount to <i>Citizens Bank Minnesota</i> SAVING	<u> </u>
Account #	Routing #091901192
Your Name:	
Address:	
City, State, Zip:	
Phone Number:	
Signature:	Date:
This authorization shall remain in place until I have submitted is changed or revoked by me in writing	



# AUTOMATIC WITHDRAWAL AUTHORIZATION

You can use your keyboard to fill out this form online and print it once completed, or you can print the form and complete it by hand. Use one form for each automatic withdrawal.

#### **Notification of Withdrawal Authorization Change**

Name of Company:	
Account Number:	
Address:	
Phone Number:	
Please change my automatic withdrawal from the fe	ollowing account:
Former Financial Institution:	
Account #	Routing #
Please make all future automatic withdrawals from t	the following:
Citizens Bank Minnesota:	
Account #	Routing #091901192
Your Name:	
Address:	
City, State, Zip:	
Phone Number:	
Signature:	Date:
This authorization will remain in effect until I have so by me in writing that this authorization has been	ubmitted to you a new authorization, or until you have been notified changed or revoked.



## **ACCOUNT CLOSURE AUTHORIZATION**

You can use your keyboard to fill out this form online and print it once completed, or you can print the form and complete it by hand. You may request the remaining balance from your old accounts(s) to be sent by check either to your new *Citizens* location or directly to your home address. Be sure to verify any outstanding items have cleared your old account.

### To Whom It May Concern: Former Financial Institution: Address: City, State, Zip: \_\_\_ Please close my account: Account Number: Please send the remaining balance to: Place an X next to your desired option. Forward a check to Citizens Bank Minnesota, 105 North Minnesota Street, New Ulm, MN 56073 Attn: Client Services to deposit to my new account. In the memo please include Deposit to Account #. Please forward me a check to my address listed below. Your Name: Address: City, State, Zip: \_\_\_\_\_ Phone Number: Primary Signature \_\_\_\_\_ Date: \_\_\_\_ Joint Signature: By signing this form, I/We authorize the above financial institution to close the account above.

**Notification of Account Closure Authorization** 



#### **Congratulations!**

We can't wait to Deliver the Ultimate Experience.

Welcome to
Citizens Bank Minnesota!