



CITIZENS BANK & TRUST CO.

www.bankwithcitizens.com



Your Community. Your Bank.

New Account Switch Kit

**Switching banks doesn't have to be confusing and difficult.
We can make switching your accounts as fast & convenient as possible.
The steps, letters, and forms provided in this kit will help to make the transition easier.**

1. Open your new Citizens Bank & Trust Co. Account:

Visit one of our 3 locations and a dedicated banking specialist will happily assist you in establishing your new account with us.

2. Get Organized:

Use the enclosed **Quick Switch Checklist** to organize the transactions that will be switched to your new Citizen Bank & Trust Co. account.

3. Stop using your previous Checking Account:

Verify that all outstanding items—checks, debit card transactions, and automatic payments have cleared your account. Destroy any unused checks, deposit tickets, and your old debit card or bring them to the bank and we can destroy them for you.

4. Change/Update your Direct Deposits:

Send the enclosed **Direct Deposit Authorization Form** to your employer or other sources with which you have direct deposits (ex: Social Security, Child Support, other government payments, etc.).

5. Move your Automatic Payments:

Send the **Automatic Payment Authorization Form** to each company with whom you have automatic payments set up to switch automatic payments to come out of your new Citizens Bank & Trust Co. account.

6. Say “Goodbye” to your Old Account:

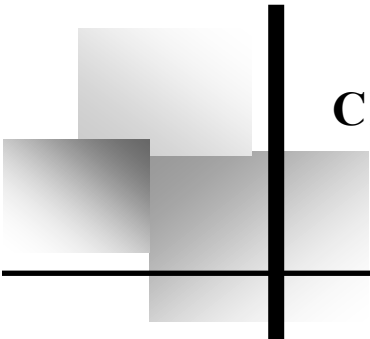
Confirm that your direct deposits and withdrawals have been redirected to your new Citizens Bank & Trust Co. bank account and that there are no outstanding checks. Fill out the **Account Closing Letter** to let your previous financial institution know how you would like any remaining funds disbursed.

3 CONVENIENTLY LOCATED BRANCHES TO SERVE YOU.

ST PAUL
721 7TH ST
PO BOX 385
ST PAUL, NE 68873
308-754-4426

LOUP CITY
650 P ST
PO BOX 624
LOUP CITY, NE 68853
308-745-0573

CENTRAL CITY
1634 16TH ST
PO BOX 177
CENTRAL CITY, NE 68826
308-946-3018



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Quick Switch Checklist

Your New Account Number _____
 Bank Routing Number 104902062

Direct Deposit:

Company Name/Address	Date Letter Mailed	Switch Completed
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Automatic Payments:

Company Name/Address	Date Letter Mailed	Switch Completed
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Closed Old Account (Make sure all your outstanding checks have cleared)

Outstanding checks payable to:	Check Number	Check Amount	Date Cleared
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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Direct Deposit Authorization Form

Customer Name _____

Address _____

City, State, Zip _____

Company Name _____

RE: Switching My Direct Deposit to a New Account

I am in the process of switching my financial institution. Effective immediately please change my direct deposit from my current account and start depositing into my new account at **Citizens Bank & Trust Co.**

Routing Number: 104902062

Account Number: _____

I hereby authorize my direct deposit to change as indicated above. If you have any questions about this request, please contact me at:

() _____

Sincerely,

Signature

Date _____

Printed Name

Social Security Number _____

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Automatic Payment Authorization Form

Customer Name _____

Address _____

City, State, Zip _____

RE: Switching My Automatic Payments to a New Account

I am in the process of switching my financial institution. Effective immediately please change my automatic withdrawal from my current account and start taking withdrawals from my new account at **Citizens Bank & Trust Co.**

Routing Number: 104902062

Account Number: _____

I hereby authorize my automatic payment to change as indicated above. If you have any questions about this request, please contact me at:

() _____

Sincerely,

Signature _____

Date _____

Printed Name _____

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Account Closing Letter

Attention: _____
(Current Financial Institution)

To Whom It May Concern,

Please accept this letter as authorization and close my account(s) listed below with your institution. Please mail any remaining funds in these accounts along with all accrued interest (if applicable) to me at the address listed below.

Account(s):

Account Number: _____ Checking Savings Other
Account Number: _____ Checking Savings Other
Account Number: _____ Checking Savings Other

(Enter your personal information here)

Name _____

Address _____

City, State, Zip _____

Phone Number _____

Account Holder Signature _____ Date _____

Joint Account Holder Signature _____ Date _____

Sincerely,

Signature Date _____

Printed Name Social Security Number _____

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