



# Simple Switch Kit

♥ *In the Heart of the Community with the Community at Heart!* ♥



*“Let Us Take the Weight Off Your Shoulders!”*

[www.bentonbank.com](http://www.bentonbank.com)

Member FDIC

# Welcome to Benton State Bank

## Let us take the weight off your shoulders!

Thank you for choosing Benton State Bank. We look forward to building our relationship with you! Our simple switch kit will help you transfer existing direct deposits or automatic payments. Moving to better banking should be easy-just follow these simple steps!

### 1. **Open your Benton State Bank checking account.**

Choose the best checking account for you. Your relationship with us can start at any of our branch locations.

- Don't forget to setup online banking and Mobile Banking.
- Order checks
- Order ATM/Debit Cards

### 2. **Stop using your old account.**

- Keep enough funds in your account to pay any pending transactions, ATM/Debit card transactions and automatic payments or withdrawals.

### 3. **Switch your automatic transactions to your Benton State Bank account.**

**Routing Number:** 075904513

**Account Number:**

#### ➤ **Direct Deposit-**

- Contact your Human Resources Department
- Contact the company handling your retirement or pension payments
- Contact the Social Security Administration

#### ➤ **Automatic Withdrawals-**

- Mortgage Company
- Homeowner's Insurance
- Auto Insurance
- Life Insurance
- Car Payments
- Any others???

#### ➤ **Automatic Charges to your old debit or credit cards**

- Utility Payments
- Cellphone Companies
- Cable or internet companies
- Any others???

### 4. **Close your old account.**

It's time to close the old account once your direct deposit and automatic payments are processed through your new Benton State Bank account. Also, verify that all of your outstanding checks and debits have been paid. Destroy all unused checks, deposit slips and ATM/Debit cards associated with the old account. Feel free to bring these in to any of our branched for us to shred and destroy for you.

# Automatic Payments

Complete this form to provide written authorization to any company who is automatically withdrawing funds from your checking account (utilities, loan payments, health club memberships, insurance payments, etc).

## Attention

Company Name	
Address	
City , State, Zip	

## To Whom It May Concern

I have recently switched banks and hereby authorize you to switch my automatic payments to my new Benton State Bank account.

Name	
Address	
City , State, Zip	
Phone Number	
Account Number with your company:	

Deduction:  I currently pay Total Amount Due  My set payment amount is \$

## Please switch my automatic payment to this account

New Benton State Bank Account Number

Routing Number: 075904513

Account Type:  Checking  Savings

Signature

Date



**Note**

Attach a voided check from your new Benton State Bank checking account when submitting your form.

# Direct Deposit

Complete this form to provide written authorization to your employer or any company who is automatically depositing funds into your checking account (payroll, pension or dividends). Some employers may provide you with a standard company form.

## Company

Company Name  
Address  
City , State, Zip


## Please update my direct deposit bank information

I have recently switched banks and hereby authorize you to switch my automatic payments to my new Benton State Bank account.

Name  
Address  
City , State, Zip  
Phone Number


## NEW direct deposit bank

New Benton State Bank Account Number

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Routing Number: 075904513

Account Type:  Checking  Savings

Benton State Bank | 42 W Main St | PO Box 27 | Benton, WI 53803

## Authorization

I have recently changed banks and hereby authorize to have my direct deposit switched to my new Benton State Bank account.

Signature

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Date

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### Note

Attach a voided check from your new Benton State Bank checking account when submitting your form.

# Authorization to Close Account

Complete this form to provide written authorization to your former financial institution to close noted accounts listed below.

## Attention

**Financial Institution**  
**Address**  
**City , State, Zip**


## To Whom It May Concern

Please accept this letter as authorization and close my bank account(s) listed below with your institution and issue a cashier's check in my name for the remaining balance along with all accrued interest (if applicable).

**Name on Account**

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Last 4 digits of Social Security Number

--

**Name on Account**

--

Last 4 digits of Social Security Number

--

**Account Number**

--

Account Type:  Checking  Savings

**Account Number**

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Account Type:  Checking  Savings

## Please send all closing balances to:

**Name**  
**Address**  
**City , State, Zip**  
**Phone Number**


## Authorization

**Signature**

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**Date**

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**Signature**

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**Date**

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