# **Getting Started**

### Making the switch to better banking today!

You can make the move to SSB Wanamingo in three easy steps. Everything you'll need is provided in this handy Switch Kit. We can't wait to welcome you to SSB Wanamingo, where you'll enjoy a better experience for all your banking needs!



Apply online in minutes or visit your local branch to open your new SSB Wanamingo account(s).

#### Switch your direct deposits and automatic withdrawals.

If you have any automatic transactions, use the provided forms to seamlessly switch them to SSB Wanamingo.

#### 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 SSB Wanamingo.





# **Direct Deposit Authorization**

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

Use this form to authorize your employer, retirement and pension funds, or any other agency to deposit your payment directly into your SSB Wanamingo account. Use one form for each direct deposit.

Notification of Direct	Direct Deposit Checklist:	
Company or Employer:		Use this list to remember all your direct deposits you need to transfer. These are the most
Address:		common direct deposits.
City, State, Zip:		Payroll
Phone Number:		Investments
Employee ID:		Retirement Plans
(if applicable)		Social Security
Effective immediately, please	deposit the net amount of my check to my SSB Wanamingo	
account. I authorize (name of	depositor)	
to automatically deposit fund	s into the account below. This authorization shall remain in	
place until I have submitted a	a new authorization, or until this authorization is changed or	
revoked by me in writing.		
Place an X next to your desired o	ption.	
Net amount to SS	B Wanamingo CHECKING	
Account #	Routing # 091914257	
Net amount to SS	B Wanamingo SAVINGS	
Account #	Routing # 091914257	
Signature:	Date:	
Name:		
Address:		
City, State, Zip:		
Phone Number:		

Page 2 of 4

**SSB** Wanamingo



### **Automatic Withdrawal Authorization**

Page 3 of 4

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

Use this form to authorize a change to any automatic payment, deductions, or withdrawals from your account. Use one form for each automatic withdrawal. Or, many companies and agencies make it easy to change your account on record online on their website.

Notification of W	/ithdrawal Authorization Chang	je	Automatic Withdrawal Checklist:
Name of Company:			Use this list to remember all your
Account Number:			automatic payments you need to transfer. These are some of the
Payment Amount:		_	most commonly used automatic payments.
Address:			Home Mortgage
City, State, Zip:			
Phone Number:			Auto Loans
			Utilities
Please cancel all autom	atic withdrawals from my old institution:		Insurance
Financial Institution:			Cable/Internet
			Gym/Club Memberships
Account #	Bank Routing #		Credit Cards
Please make all future a	utomatic withdrawals from my new institution:		Investments
Financial Institution:	SSB Wanamingo		Subscriptions
Account #	Bank Routing #	091914257	Charity Donations
	in in effect until I have submitted to you a new auth ne in writing that this authorization has been chang		
Signature:	Da	ate:	
Name:			
Address:			
City, State, Zip:			
Phone Number:			





# **Account Closure Authorization**

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You can authorize your remaining balance to be deposited automatically to your new SSB Wanamingo 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 Accour	Congratulations!	
To Whom It May Concern: Financial Institution: Address:		You had to sign your name a few timesbut submitting these forms completes your switch to a truly better banking experience. We can't wait to show you the difference a
City, State, Zip:		local partner makes. Welcome to SSB Wanamingo!
Please close my account: Account Number:	Primary Owner:	
Address: City, State, Zip:		
Please send the remaining balan Place an X next to your desired optic	on.	
Please deposit direct Account #	tly to my new account at SSB Wanamingo. Routing # <b>091914257</b>	
	check to my address listed below.	
Primary Signature: Joint Signature:	Date:	
Name:		
Address: City, State, Zip:		
Phone Number:		

