

Hassle Free Switch Kit

Changing Banks is now as easy as 1, 2, and 3.

Step One

Open your new First State Bank of Uvalde Bank Account and start enjoying the services of First State Bank of Uvalde. You will need to bring your current photo ID and social security number.

Stop using the account you want to close. The sooner you stop writing checks, initiating payments, and stop using your ATM/Debit card, the sooner your transactions will clear, and a final balance amount can be determined.

Step Two

Set up direct deposits to your First State Bank of Uvalde account(s). Use the Direct Deposit Switch Form to change your direct deposit information with your employer. Set up automatic payments and pre-authorized bill payments by contacting your service providers or by submitting an Automatic Authorization form. Don't forget to sign up for Online Banking, E-Statements, and Mobile Banking.

Step Three

Close your old account. Simply complete the Close Bank Account Form and send it to your old bank. Make sure all checks and other payments you authorized have been paid. Remember to destroy unused checks, deposit slips, and ATM/debit cards.

If you need assistance or have any questions, please call Account Services at (830) 278-6231 and we will be happy to help you.

We want to welcome you to First State Bank of Uvalde and want you to have the very best!



Direct Deposit/Automatic Payment Information

Benefits:

- Convenient Your check(s) are deposited electronically into your First State Bank of Uvalde account(s). Enjoy the convenience of your money automatically being deposited for you. No need to worry when you are on vacation, ill or can't make it to the bank.
- Fast You have immediate access to your money once deposit is processed.
- Safe Never worry about checks getting lost, delayed, or stolen.
- Automatic Payment You can also use the routing number and account number to setup automatic payments for your recurring bills from your checking account.
- Automatic Savings Watch your savings grow when you have a portion of your pay direct deposited to your savings.

Type of Direct Deposit	Existing Enrollment	New Enrollment
 Salary/Wages Pension Dividend/Investment Income 	Fill out Direct D	eposit Switch form.
 Social Security Eagle Pass Social Security Kerrville Social Security Kerrville Local No. Social Security General No. Supplemental Security Income (SSI) Railroad Retirement 	1-888-862-4864 (9am-3pm) 1-877-895-0043 1-830-895-1422 1-800-772-1213 (1-800-325-0778 TTY) Call 1-877-772-5772	Visit a First State Bank of Uvalde Branch near you or For New Enrollments only, you can visit <u>www.godirect.org</u> , or call Go Direct at 1-800-333-1795 English
 Railroad Retirement Veterans Compensation and Pension 	(1-312-751-4701 TTY) Call 1-877-767-6738 (1-800-829-4833 TTY)	1-800-333-1792 Spanish Visit <u>www.va.gov/vaforms</u>
Other Federal Agency Benefits	Call Go Direct at 1-800-333-1795 to get the telephone numbers of many federal agencies.	
State of Texas Employee	Visit https://comptroller.texas.gov/programs/systems/direct- deposit/	
Texas Teacher RetirementCivil Service Retirement	Visit https://www.trs.texas.go Call 1-888-767-6738 (1-855-887-4957 TTY)	v/Pages/Homepage.aspx Visit https://www.opm.gov/

TTY - Teletypewriter for the hearing impaired

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Direct Deposit Switch Form

Complete this form to authorize direct deposit of your payroll or other credit to your First State Bank of Uvalde checking or savings account. 3 EASY STEPS..... Date: To (Company): Address: 1. Complete this form. City, State, Zip Code: 2. Attach a voided check to this form to confirm your account and routing From: number. 3. Submit this completed form and a Address: voided check to your Human City, State, Zip Code: Resources/Payroll Department, or to the originator of your direct deposit. Social Security Number: Telephone Number: Please direct deposit to my: Existing Direct Deposit □ New Direct Deposit Account you would like your check automatically deposited into: □ Checking □ Savings □ Money Market **Deposit Instructions:** Please place voided check here Please deposit entire amount into account #_____ □ Please deposit \$ _____into savings account number # ______ and the remainder to checking account number #_____ One form should be used for each request. Please make copies as needed. I authorize (name of company) and First State Bank of Uvalde to automatically deposit my check into my account listed above. This authorization will remain in effect until I send written notice of change or cancellation.

Customer Signature:

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Automatic Payment Authorization

Start saving time and money when you select the automatic payment option from your First State Bank of Uvalde account.	Complete this form to authorize your service providers to electronically debit your FSB checking account:
 Complete this form. Provide your new FSB account number and 9 –digit routing number. Submit this completed form and a voided check to each service provider to automatically debit your FSB account. 	First Name:
Checklist: Auto Loans Auto Insurance Cable/TV Childcare Credit Cards Electric Garbage Gas/Oil Health Club Loans Mortgage/Rent Sewer Student Loan Telephone Water	Name of Service Provider:
You can pay all your bills online. Simply visit <u>www.fsbuvalde.com</u> to sign up for Free Online Banking and Free Bill pay today! Use one form for each automatic payment. Make additional copies as needed.	I authorize the service provider indicated to initiate payments from my First State Bank of Uvalde account above. This authorization will remain in effect until I send written notice of change or cancellation. Primary Accountholder's Signature: Date: Joint Accountholder's Signature: Date:

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Bank Account Closure Form

Date: _____

Financial Institution Name: _____

RE: Request to Close Account

Please close the following accounts immediately.

Account Type	Account Number	Name(s) on the Account

Please forward all remaining funds including accrued interest to me at the following address, and contact me if you have any questions.

Name: ______

Address: _____

City, State, and Zip Code: _____

Signature:	Date:
Joint Owner Signature:	Date:

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