

## WASHINGTON STATE BANK

# YOUR ACCOUNT SWITCH KIT

Ask for KASASA



Washington State Bank - your bank for life.



#### **WSB Account Switch Kit**

#### Welcome to Washington State Bank! We are happy you are here!

Thank you for choosing us to be your Bank. We have put together a 5-step checklist to assist you with making the switch from your current financial partner to Washington State Bank. The checklist simplifies your transition and will help you to track the progression of your "switch".

If we can be of any assistance throughout this process, please do not hesitate to contact us at any one of our 5 full-service branches. You may also stop by and visit with one of our knowledgeable staff members. They will be happy to assist you in completing your "switch" over to Washington State Bank. See listing of full-service branches below.

## "Welcome to the Washington State Bank Family" -President/CEO Kip Bertrand

#### **Our 5 Full-Service Locations are Available to Assist You**

WASHINGTON BRANCH 103 N. MAIN STREET WASHINGTON, LA 70589 (337) 826-3641

LAFAYETTE BRANCH 1042 CAMELLIA BLVD, STE 9 LAFAYETTE, LA 70508 (337) 443-6026

LEONVILLE (Drive Thru Only) 3371 OSCAR RIVETTE STREET LEONVILLE, LA 70551 (337) 443-6026 OPELOUSAS BRANCH 1810 S. UNION STREET OPELOUSAS, LA 70570 (337) 948-4544

EUNICE BRANCH 215 S. 2ND STREET EUNICE, LA 70535 (337) 457-8952

PALMETTO (Drive Thru Only) 105 W RAILROAD AVENUE PALMETTO, LA 71358 (337) 443-6026 ARNAUDVILLE BRANCH 238 UNION STREET ARNAUDVILLE, LA 70512 (337) 754-5121



#### **Step 1: CHOOSE YOUR ACCOUNT**

Contact one of our knowledgeable representatives to discuss and select the account(s) that is best suited for your needs. Don't forget to ask about our Kasasa Free Checking. You will want to open your account(s) with us prior to closing your old account(s). You do not want to close your account(s) until all outstanding checks/ items have cleared.

#### **Step 2: STOP USING YOUR CURRENT ACCOUNT**

Stop actively using your previous account that you will be closing and begin using your new account with Washington State Bank immediately upon opening. We want to ensure all of your previous account items have cleared and any automatic deposits and withdrawals have been transferred successfully.

#### **Step 3: CHANGE YOUR DIRECT DEPOSIT**

Change your direct deposit(s) to Washington State Bank. We have included a Direct Deposit Change Form in this kit for your convenience. Some employers will require that you complete their Direct Deposit form, with a voided check attached.

#### Step 4: TRANSFER YOUR AUTOMATIC DRAFTS

Review your last couple of bank statements and list the automatic deposits and withdrawals on the Washington State Bank Switch Kit Organizer. (attached) Transfer your Automatic Payments such as recurring loan payments, insurance premiums, health club memberships, etc. from your former bank account to your new Washington State Bank account. Be sure to include automatic payments from your debit card. Most direct deposit or automatic payments can be changed online or by phone. We have included an Automatic Payment Change Form in this kit for your convenience.

#### Step 5: CLOSE YOUR OLD ACCOUNT

Close your former bank account(s) after all of your checks have cleared and your direct deposits and automatic payments begin posting to your new Washington State Bank account. Complete and send the Request to Close Account(s) Form (attached) to your former bank. We will be happy to assist you with this form. Some institutions may require additional information.

## **Switch Kit Organizer**

THIS FORM IS PROVIDED TO ASSIST IN TRACKING ALL OF THE INFORMATION YOU WILL NEED TO SWITCH ALL OF YOUR AUTOMATIC DEPOSITS AND PAYMENTS TO YOUR NEW WASHINGTON STATE BANK ACCOUNT.

WASHINGTON STATE BANK'S ROUTING NUMBER	065202461
YOUR WASHINGTON STATE BANK ACCOUNT NUMBER	

#### DIRECT DEPOSITS: LIST ALL DIRECT DEPOSITS TO YOUR ACCOUNT(S).

DEPOSIT TYPE	COMPANY OR INSTITUTION	ACCOUNT NUMBER	AMOUNT	DATE	COMPLETED
EMPLOYER PAYROLL					
SOCIAL SECURITY					
PENSION/RETIREMENT					
INVESTMENT/BROKERAGE					
OTHER:					
OTHER:					
OTHER:					

#### AUTOMATIC PAYMENTS/TRANSFERS: LIST ALL AUTOMATIC WITHDRAWALS FROM YOUR ACCOUNT(S).

WITHDRAWAL TYPE	COMPANY OR INSTITUTION	ACCOUNT NUMBER	AMOUNT	DATE	COMPLETED
HOME INSURANCE					
AUTO INSURANCE					
LIFE INSURANCE					
GAS/ELECTRIC					
TELEPHONE/CELL					
CABLE/INTERNET:					
MORTGAGE					
AUTO LOAN					
HOME EQUITY LOAN					
PERSONAL LOAN					
CREDIT CARD					
HEALTH CLUB					
OTHER					
OTHER					
OTHER					

### **Direct Deposit Change Form**

DATE: TO:\_\_\_\_\_(COMPANY/EMPLOYER) FROM: (YOUR NAME) TO WHOM IT MAY CONCERN: YOU ARE CURRENTLY DEPOSITING MY: (CHECK ALL THAT APPLY) ☐ ENTIRE PAYCHECK ☐ PART OF MY PAYCHECK ☐ OTHER TYPE OF PAYMENT: INTO MY OLD ACCOUNT AT (FINANCIAL INSTITUTION) ROUTING NUMBER: ACCOUNT NUMBER: PLEASE BEGIN MAKING THESE AUTOMATIC DEPOSITS INTO MY NEW WASHINGTON STATE BANK ACCOUNT. NEW ROUTING NUMBER: 065202461 NEW ACCOUNT NUMBER: CHECKING ☐ SAVINGS ☐ ATTACHED IS A VOIDED CHECK FROM MY ACCOUNT. PLEASE DO NOT HESITATE TO CONTACT ME SHOULD YOU HAVE ANY QUESTIONS AT THE NUMBER LISTED BELOW. PLEASE NOTIFY ME WHEN THE CHANGE WILL BE EFFECTIVE. DAYTIME PHONE: THANK YOU FOR ALL OF YOUR ASSISTANCE! IT IS GREATLY APPRECIATED. SIGNATURE:

PLEASE ACCEPT THIS FORM AS AUTHORIZATION TO CHANGE MY DIRECT DEPOSIT BANK INFORMATION.

## **Automatic Payment Change Form**

PLEASE CHANGE THE ACCOUNT FOR MY AUTOMATIC PAYMENTS.

DATE:	
ГО:(	COMPANY/EMPLOYER)
FROM:(YOUR N	NAME)
TO WHOM IT MAY CONCERN:	
YOU ARE CURRENTLY WITHDRAWING \$	EACH MONTH FROM THE FOLLOWING
MY OLD ACCOUNT AT	(FINANCIAL INSTITUTION)
ROUTING NUMBER:	ACCOUNT NUMBER
STATE BANK ACCOUNT.  ACCOUNT EFFECTIVE ON (DATE: MM/DD/Y	Y)/  NEW ACCOUNT NUMBER:
IF YOU HAVE ANY QUESTIONS, PLEASE FE	
ADDRESS:	
DAYTIME PHONE:	
SIGNATURE:	

Your Account Switch Kit: Notes		



## **Request to Close Account**

FINANCIAL INSTITUTION:	
ADDRESS:	
RE: ACCOUNT CLOSURE	
ATTENTION: MEMBER SERVICE/ACCOUNT CLOSIN	G DEPARTMENT
This letter is to request to have my accounts closed at you listed below and send a check for the remaining balance	
If you have any questions regarding this request, please below. Thank you in advance for your prompt attention t	
Sincerely,	
AUTHORIZED SIGNATURE	DATE
ACCOUNT IN	FORMATION
NAME:	PHONE:
ADDRESS:	
SAVINGS ACCOUNT NUMBER:	
CHECKING ACCOUNT NUMBER	