



PO Box 207  
Sigourney, IA 52591  
641-622-2525

PO Box 470  
Williamsburg, IA 52361  
319-668-2888

Member  
**FDIC**

877-611-2525  
[www.bankkcsb.com](http://www.bankkcsb.com)



Make the  
switch

#### 6 Easy Steps to Change Your Accounts:

- 1 Meet with friendly County Bank staff to open your County Bank accounts
- 2 Move your money from your old bank
- 3 Change your Direct Deposit for your paychecks
- 4 Change your automatic payments to your new County Bank account
- 5 Convert any other automatic deposits or payments
- 6 Close your old account

Name: \_\_\_\_\_

Social Security #: \_\_\_\_\_

Birthdate: \_\_\_\_\_

Driver's License #: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

E-mail: \_\_\_\_\_

I am interested in the following County Bank products and services:

- |       |                                    |       |                                 |
|-------|------------------------------------|-------|---------------------------------|
| _____ | Checking Account                   | _____ | Savings Account                 |
| _____ | a. Personal                        | _____ | a. Student                      |
| _____ | b. Student                         | _____ | b. Personal                     |
| _____ | c. Business                        | _____ | c. Money Market                 |
| _____ | d. Golden Opportunities            | _____ | d. Health Savings               |
| _____ | e. Now                             | _____ | Time CDs                        |
| _____ | f. Super Now                       | _____ | IRAs                            |
| _____ | Debit/ATM Card                     | _____ | Online Banking                  |
| _____ | Overdraft Protection/Auto Transfer | _____ | Bill Pay                        |
| _____ | Loan                               | _____ | Savings Bonds                   |
| _____ | a. Car Loan                        | _____ | Travelers Checks                |
| _____ | b. Home Loan                       | _____ | Term Life Insurance             |
| _____ | c. Business Loan                   | _____ | Visa or Mastercard Credit Cards |
| _____ | d. Farm Loan                       | _____ | Mastercard Gift Cards           |
| _____ | Equipment Leasing                  | _____ |                                 |

All the information I have given in this form is true and correct. I request that the paperwork necessary to open the account(s) indicated above be prepared. I understand that my signature, proof of identification and opening deposit(s) will be required at a future date. By signing below I authorize you to check my credit and employment history and to answer any questions others may ask you about my credit record with you.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date



Sigourney • Williamsburg

Your Community Partner Since 1884

Member  
FDIC





Let us help you switch your automatic payments and deposits. Use previous bank statements for easy reference.

List Automatic Payments & Transfers Here

Name/Address	Amount/Date
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

List Direct Deposits Here

Name/Address	Amount/Date
_____	_____
_____	_____
_____	_____

# Payroll Direct Deposit

Change or New

\_\_\_\_\_  
Date

\_\_\_\_\_  
Employer/Depositor's Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State/Zip

To Whom It May Concern:

You are currently depositing my paycheck into the following account(s):

Former Bank: \_\_\_\_\_  
Bank Routing Number: \_\_\_\_\_  
Account Number: \_\_\_\_\_ Type: \_\_\_\_\_  
Account Number: \_\_\_\_\_ Type: \_\_\_\_\_

Please stop making deposits to that account and instead make them to:

**Keokuk County State Bank**  
Bank Routing Number: **073903891**  
Account Number: \_\_\_\_\_ Type: \_\_\_\_\_  
Account Number: \_\_\_\_\_ Type: \_\_\_\_\_

If you have any questions about this please contact me at the following number(s):

Daytime: \_\_\_\_\_  
Evening: \_\_\_\_\_

Thank you.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Id # (if applicable)

## Request to Close Account

---

Date

---

Financial Institution Name

---

Address

---

City/State/Zip

To Whom It May Concern:

Please close my account \_\_\_\_\_ (account number) and send a check for the remaining balance to me at the address listed below.

If you have any questions about this request please contact me at

\_\_\_\_\_  
(phone #)

Thank you.

Sincerely,

---

Signature

---

Joint Owner Signature

---

Printed Name

---

Printed Joint Owner Name

---

Address

---

City/State/Zip

## Automatic Payment Authorization

Change or New

Complete a separate form for each automatic payment. This form may be copied.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State/Zip

New Bank Name:

Keokuk County State Bank  
201 S Jefferson St  
Sigourney, IA 52591  
ABA/Transit #: 073903891

New Bank Account Number: \_\_\_\_\_

Checking       Savings

This is a

- change to my/our existing payment authorization  
 new payment authorization

Vendor/Payee Account Number: \_\_\_\_\_

(Account number with utility, credit card, insurance company, etc.)

Effective immediately, I/we authorize \_\_\_\_\_ (name of vendor)  
and Keokuk County State Bank to initiate variable entries to my/our checking/savings account. This  
authorization will remain in effect until I notify the above state vendor in writing to cancel it in such time to  
allow a reasonable opportunity to act. Also, I agree that I/we remain obligated to pay for these services in  
the event a charge to my account is not honored, for whatever reason, and that the above state vendor  
retains its normal collection rights.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Joint Owner Signature

# K COUNTY S BANK

Sigourney • Williamsburg

*View your accounts, transfer between  
accounts, make loan payments, pay bills  
and more through*

*Online Banking & Bill Pay!*

SIGN UP AT

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