



Quick Switch Kit: Getting Started

Let us save you time! Complete this Quick Switch Kit form and return it to Citizens State Bank by mail or bring it in to one of our personal bankers. We'll get the paper work ready for you. Stop back in to see a personal banker, sign forms and make a deposit.

Primary Account Holder Information

Name: _____
 Address line 1: _____
 Address line 2: _____
 City: _____ State: _____ Zip: _____
 Home Phone: _____ Work Phone: _____
 Social Security Number: _____
 Driver's License Number: _____
 Issuing State: _____ Issue Date: _____ Expiration Date: _____
 E-Mail Address: _____
 Date of Birth: _____
 Employer: _____

Secondary Account Holder Information

Name: _____
 Address line 1: _____
 Address line 2: _____
 City: _____ State: _____ Zip: _____
 Home Phone: _____ Work Phone: _____
 Social Security Number: _____
 Driver's License Number: _____
 Issuing State: _____ Issue Date: _____ Expiration Date: _____
 E-Mail Address: _____
 Employer: _____

Please note: Federal regulation requires that Citizens State Bank have on file, verification of customer's identification. Please be prepared to have our Personal Banker or Staff verify the above information by driver's license or other photo ID.

The above information I/we have provided is correct the best of my/our knowledge. I/we authorize Citizens State Bank to check credit and employment history if necessary.

Signature
Signature

Date
Date

Your partner in banking

Clayton ▪ Eau Claire ▪ La Crosse ▪ Onalaska
www.citizensstatebank.us

