



Switch Kit Checklist

My new account #: _____

Routing Number: 075905910

Automatic Deposits (specify where they are received)

	Company	Contact Name	Phone Number
<input type="checkbox"/> Payroll	_____	_____	_____
<input type="checkbox"/> Social Security	_____	_____	<u>(888) 862-4811</u>
<input type="checkbox"/> Investments/Retirement Plans	_____	_____	_____
<input type="checkbox"/> Other	_____	_____	_____

Automatic Withdrawals

	Account Number	Phone Number	Transfer/Payment Date
<input type="checkbox"/> Auto/Homeowner Insurance	_____	_____	_____
<input type="checkbox"/> Auto Loans	_____	_____	_____
<input type="checkbox"/> Cable TV/Satellite	_____	_____	_____
<input type="checkbox"/> Charitable Contributions	_____	_____	_____
<input type="checkbox"/> Cell Phone	_____	_____	_____
<input type="checkbox"/> Club/Gym Memberships	_____	_____	_____
<input type="checkbox"/> Credit Card	_____	_____	_____
<input type="checkbox"/> Credit Card	_____	_____	_____
<input type="checkbox"/> Credit Card	_____	_____	_____
<input type="checkbox"/> Dental Insurance	_____	_____	_____
<input type="checkbox"/> Gas & Electric Company	_____	_____	_____
<input type="checkbox"/> Health Insurance	_____	_____	_____
<input type="checkbox"/> Home Equity Loans	_____	_____	_____
<input type="checkbox"/> Home Mortgage/Rent	_____	_____	_____
<input type="checkbox"/> Internet Services	_____	_____	_____
<input type="checkbox"/> Investments & Annuities	_____	_____	_____
<input type="checkbox"/> Life Insurance	_____	_____	_____
<input type="checkbox"/> Store Debit Card	_____	_____	_____
<input type="checkbox"/> Student Loans	_____	_____	_____
<input type="checkbox"/> Subscriptions	_____	_____	_____
<input type="checkbox"/> Water Company	_____	_____	_____
<input type="checkbox"/> Other _____	_____	_____	_____

