

# New Account Transfer Kit

Transfer your account today to Home City  
Federal Savings Bank!

Transferring is easy. In this kit you will find  
forms necessary to move your deposit  
relationship to Home City Federal Savings Bank.

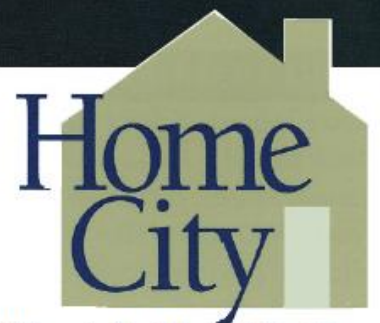


Internet Banking  
Corporate Checking  
Mortgage Lending

Personal Checking  
Commercial Lending  
Certificates of Deposit

## Home City Federal Savings Bank

2454 North Limestone St.  
Springfield, Ohio 45503  
937-390-0470  
63 West Main Street  
Springfield, Ohio 45502  
937-322-5844



*There's No Place Like Home*



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



*Supporting Our Community Since 1925*



## **New Account Transfer Checklist**

**Use this checklist, along with your most recent statement from your old account (if applicable) to quickly identify all parties that need to be updated with your new account information.**

### **Direct Deposits**

- |  |  |
|--|--|
| <input type="checkbox"/> Government Deposits (such as Social Security)                     | <input type="checkbox"/> Child Support or other court-issued deposit                     |
| <input type="checkbox"/> Transfers from other bank accounts (such as Savings and Checking) | <input type="checkbox"/> Other Direct Deposits (such as payroll, interest and dividends) |
| <input type="checkbox"/> Other   |  |

### **Automatic Utility Payments**

- |  |  |
|--|--|
| <input type="checkbox"/> Electric                | <input type="checkbox"/> Water/Sewer     |
| <input type="checkbox"/> Telephone/Long Distance | <input type="checkbox"/> Cable/Satellite |
| <input type="checkbox"/> Gas                     | <input type="checkbox"/> Other           |

### **Other Payments Account Number**

- |   |   |
|---|---|
| <input type="checkbox"/> Account transfers to other bank accounts | <input type="checkbox"/> Brokerage – Automatic Investments          |
| <input type="checkbox"/> Child Support or court-issued payments   | <input type="checkbox"/> Insurance                                  |
| <input type="checkbox"/> Internet Service                         | <input type="checkbox"/> Loans (i.e. car, home equity, credit card) |
| <input type="checkbox"/> Mortgages                                | <input type="checkbox"/> Other                                      |

Reminder: If you have any remaining checks from another bank, we can assist you by shredding them for you.



# Payroll Deposit Authorization Form

Use this form to request the direct deposit of your payroll check to Home City Federal Savings Bank Account. You will need to provide this information to your employer with any other additional information and authorization they might need to initiate the deposit. Please contact your employer's payroll department if you have any questions about their process.

## **DIRECT DEPOSIT AUTHORIZATION**

I hereby authorize (company name) \_\_\_\_\_ hereinafter COMPANY, to make payment of any amount owed to me for payroll by initiating credit entries to my account indicated below at Home City Federal Savings Bank, and I authorize and request Home City Federal Savings Bank to accept credit entries initiated by COMPANY to such account and to credit the same to such account without responsibility for the correctness thereof. It is understood that in signing this agreement I allow COMPANY to initiate reversal of the described payment entry in the event of error in calculation or overpayment.

Employee Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Telephone \_\_\_\_\_

Social Security Number \_\_\_\_\_

(NOTE: For Social Security Direct Deposit, we can assist you with calling the Social Security Administration Direct Deposit Department at 1-800-772-1213 or signing up online at [www.ssa.gov/deposit](http://www.ssa.gov/deposit).)

( ) Please send an automatic direct deposit to:

Home City Federal Savings Bank Checking Account Number: \_\_\_\_\_

Home City Federal Savings Bank Routing & Transit Number: \_\_\_\_\_

( ) Please discontinue sending my automatic direct deposit to:

(Previous Financial Institution): \_\_\_\_\_

Account #: \_\_\_\_\_

Please begin sending the same deposit to Home City Federal Savings Bank.

Deposit \$ \_\_\_\_\_ OR entire amount to Checking Account #: \_\_\_\_\_

Deposit \$ \_\_\_\_\_ OR entire amount to Savings Account #: \_\_\_\_\_

I further understand this authorization may be terminated by me at any time by written notification to my employer or to Home City Federal Savings Bank. Any such notification to my employer shall be effective only with respect to entries initiated by my employer after receipt of such notification and a reasonable opportunity to act on it. Any such notification to Home City Federal Savings Bank shall be effective only with respect to entries credited to my account by Home City Federal Savings Bank after receipt of such notification and a reasonable time to act on it.

Primary Account Owner

Signature \_\_\_\_\_ Date \_\_\_\_\_





## Close Account Request

Date \_\_\_\_\_

Bank \_\_\_\_\_

Address \_\_\_\_\_

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

This form serves as my request to close the following account:

Account Number \_\_\_\_\_

Name(s) on Account \_\_\_\_\_

Social Security Number \_\_\_\_\_

Please forward the remaining balance to the following address:

Name \_\_\_\_\_

Address \_\_\_\_\_

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

Signature \_\_\_\_\_

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

Address \_\_\_\_\_

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





## Account Transfer

Please complete this form for each of your direct deposits and automatic payments (excluding Government Deposits)\*. Send each form, along with a voided check from your new Home City account, to each business you have authorized to debit or credit your account. If you have any questions, contact any New Accounts Representative for help to ensure a timely, accurate switch to your new account at Home City.

\* Please see a Home City Federal Savings Bank New Accounts Representative for the government's change form.

To:

From:

Merchant Name

Your Name

Merchant Address

Your Address

City, State, Zip Code

City, State, Zip Code

Merchant Account Number

Please redirect my:  Direct Deposit  Automatic Payment

To my new:  Checking  Savings

Effective: \_\_\_\_\_

My new Home City account information is listed below:

Account Number

Signature

Date

Daytime Phone Number



Please attach a VOIDED check from your new Home City account to this page (if applicable)

