

SouthEast Bank & Trust — Switch Kit

**It's easy to make the switch to SouthEast Bank & Trust — WE DO ALL THE WORK!
We make the phone calls, we write the letters. All you have to do is complete the information below, bring it to a SouthEast Bank Office and we do the rest!**

AUTHORIZATION TO CHANGE MY DIRECT DEPOSIT

Complete a separate form for each automatic payment. You can photocopy this form.



Name of direct depositor: _____ Phone #: _____
[name of entity depositing to your account - please print]

Depositor address: _____

I plan to close my checking account at: _____ Account #: _____
[name of old financial institution]

Account holder: _____ Social Security #: _____

Effective immediately, I authorize direct deposit to my new checking account at **SouthEast Bank, ATTN: Checking Services
P.O. Box 1806, Athens, TN 37371**

My new checking account # is: _____ The new routing/transit number is **064208767**

I have attached a deposit slip to verify the new account information.

Signature: _____ Daytime phone: _____

*All other direct deposit allocations will remain the same.

Member FDIC Equal Housing Lender

AUTHORIZATION TO CHANGE AUTOMATIC PAYMENT

Complete a separate form for each automatic payment. You can photocopy this form.



Name of payee: _____
[utility, mortgage lender, investment company or other organization you wish to pay automatically from your checking account - please print]

Payee address: _____

I plan to close my checking account at: _____ Account #: _____

Account holder: _____ Social Security #: _____

Effective immediately, I authorize automatic payment from my new checking account at **SouthEast Bank, ATTN: Checking Services
P.O. Box 1806, Athens, TN 37371**

My new checking account # is: _____ The new routing/transit number is **064208767**

I have attached a voided check to verify the new account information.

Signature: _____ Daytime phone: _____

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AUTHORIZATION TO CHANGE MY FEDERAL GOVERNMENT DIRECT DEPOSIT

Complete a separate form for each automatic payment. You can photocopy this form.



Name of direct depositor: _____
[name of entity depositing to your account - please print]

Depositor address: _____

I plan to close my checking account at: _____ Account #: _____
[name of old financial institution]

Account holder: _____ Social Security #: _____

Name of payee (beneficiary): _____ Social Security # of payee: _____

Effective immediately, I authorize direct deposit to my new checking account at **SouthEast Bank, ATTN: Checking Services
P.O. Box 1806, Athens, TN 37371**

My new checking account # is: _____ The new routing/transit number is **064208767**

I have attached a deposit slip to verify the new account information.

Type of benefit (check one): Social Security SSI Income Railroad Retirement VA Benefit Civil Service

Signature: _____ Daytime phone: _____

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