



BEST HOMETOWN BANK

Switch Kit Pre-Transfer Worksheet

The Switch Kit is a free tool that allows you to quickly and easily change your accounts from your financial institution to Best Hometown Bank. By filling out a series of forms, the Switch Kit provides all the documentation that is needed to complete the process. The pre-transfer worksheet is intended to help you gather all of the information needed before filling out the Switch Kit forms. Once the information has been collected, you're ready to switch.

The Information you will need to collect:

Your new Best Hometown Bank account number.

If you don't have an account with Best Hometown Bank, you will need to open one before switching.

Your current financial institution information.

Your current financial institution information is needed for us to close your current accounts.

A list of any automated debits (ACH)

Gather all information on companies that make electronic withdrawals from your account. This includes automatic debits (ACH) or automatic charges to your debit card. Common uses of automatic debits include rent/mortgage, utilities, phone and cable bills.

Any Direct Deposits.

List any companies who regularly deposit funds into your account. Some common uses of Direct Deposits include payroll, taxes, or expense reimbursements. Social Security customers need to call the Social Security Administration toll free at 1-800-772-1213 or go to www.ssa.gov/deposit/howtosign.htm
Local Social Security office number: 1-855-285-6006.

Electronic Payments (Online Bill Pay)

If you use an online bill pay service at your current financial institution, be sure to cancel each payee.

Questions?

Call our Customer Service Representatives or stop by any of our two convenient locations and we will be glad to help.

Best Hometown Bank
100 East Clay Street
Collinsville, IL 62234
(618) 345-1121

Best Hometown Bank
2110 North Center
Maryville, IL 62062
(618)344-9650



BEST HOMETOWN BANK

Pre-Transfer Checklist

<p><input type="checkbox"/> Last Month's Bank Statement</p> <p>Automatic Deposits</p> <p><input type="checkbox"/> Payroll Contact the HR Department where you work. Please include a voided check Effective Date of Change _____</p> <p>Utilities Automatic Payment</p> <p><input type="checkbox"/> Gas Account No. _____ Effective Date of Change _____</p> <p><input type="checkbox"/> Electric Account No. _____ Effective Date of Change _____</p> <p><input type="checkbox"/> Water/Sewer Account No. _____ Effective Date of Change _____</p> <p><input type="checkbox"/> Local/Long Distance Telephone Service Account No. _____ Effective Date of Change _____</p> <p><input type="checkbox"/> Cellular Telephone Service Account No. _____ Effective Date of Change _____</p> <p>Other Payments</p> <p><input type="checkbox"/> Loans (e.g. car, home equity, student loan, credit card) Account No. _____ Effective Date of Change _____ Account No. _____ Effective Date of Change _____</p> <p><input type="checkbox"/> Mortgage Account No. _____ Effective Date of Change _____</p>	<p><input type="checkbox"/> Transfer From Other Bank Accounts Effective Date of Change _____</p> <p><input type="checkbox"/> Brokerage Deposits Effective Date of Change _____</p> <p><input type="checkbox"/> Other Effective Date of Change _____</p> <p><input type="checkbox"/> Internet Service Account No. _____ Effective Date of Change _____</p> <p><input type="checkbox"/> Cable or Satellite TV Account No. _____ Effective Date of Change _____</p> <p><input type="checkbox"/> Garbage Account No. _____ Effective Date of Change _____</p> <p><input type="checkbox"/> Other Account No. _____ Effective Date of Change _____</p> <p><input type="checkbox"/> Insurance (e.g. life, health, auto, home) Account No. _____ Effective Date of Change _____ Account No. _____ Effective Date of Change _____</p> <p><input type="checkbox"/> Brokerage-Automatic Investments Effective Date of Change _____</p> <p><input type="checkbox"/> Other Effective Date of Change _____</p> <p><input type="checkbox"/> Other Effective Date of Change _____</p>
--	--



BEST HOMETOWN BANK

Direct Deposit/Direct Debit Transfer Authorization Agreement

Best Hometown Bank has received your written authorization to transfer your direct deposit(s) and direct debit(s) from another financial institution to your account at Best Hometown Bank. The direct debit(s) you have authorized Best Hometown Bank to transfer to your account #, _____, will be posted in the order in which the bank receives them.

Best Hometown Bank will exercise ordinary care to complete your authorized transfer of direct deposit(s) and direct debit(s). If you incur any fees or charges due to negligence by Best Hometown Bank in the processing of your written request and/or authorized direct deposit(s) and direct debit(s) request, Best Hometown Bank will reimburse you for these fees and charges. Claims for reimbursement must be submitted in writing within 90 days of the date of your authorization to transfer. To file a claim, send a written request with your name, address, and account number along with a copy of the billing notice for the fee or charge to:

Best Hometown Bank
ACH Department
100 E. Clay St.
Collinsville, IL 62234

Customer Signature

Date

Bank Representative Signature

Date

Member FDIC



BEST HOMETOWN BANK

Please close my account

Date

Bank Name

Address

City

State

Zip

To Whom It May Concern:

Please close the account(s) noted below, mail the balance and any interest to Best Hometown Bank, 100 East Clay Street, Collinsville, IL 62234 and a confirmation of account closure to customer:

Account Number

Checking Account

Savings Account

Money Market Account

Certificate Of Deposit

- Please close my CD immediately.
I understand there may be penalties
for withdrawing before the maturity
date.

- Please close my CD upon maturity.

If you have any questions regarding this request please contact me.

Sincerely,

Account Holder's Signature

Address

Print Name

City

State

Zip

Account number w/payee

Phone Number

Day/Evening



BEST HOMETOWN BANK

Please change my direct deposit.

Date

Employer, pension, administrator or government entity making the direct deposit

Address

City State Zip

Phone

To Whom It May Concern:

Currently you are depositing my _____ payment into my bank account(s):
Current Bank _____ Routing Number _____
Account Number _____ Account Number _____

Please start making these automatic deposits into my new account(s) at Best Hometown Bank.

New bank information:

Best Hometown Bank address: 100 East Clay Street, Collinsville, IL 62234

Best Hometown Bank routing number: 281070914

Deposit \$ _____ or _____ % of my _____ into my
Best Hometown Bank account number: _____

Deposit \$ _____ or _____ % of my _____ into my
Best Hometown Bank account number: _____

Please send me confirmation indicating when this change takes effect.

If you have any questions regarding this request please contact me.

Sincerely,

Customer Signature

Print Name

Account number w/payee

Address

City State Zip

Phone number Day/Evening



BEST HOMETOWN BANK

Please change my automatic payment

Date

Name of insurance company, mortgage provider, utility company,
any payee that automatically debits payments from your account.

Address

City State Zip

To Whom it May Concern:

Currently you debit my _____ payment from my bank account(s):
(Indicate the type of payment)

Current Bank _____ Routing Number _____
Account Number _____ Account Number _____

**Please stop this debit from the above listed account on _____ and begin to debit this payment from my
new account at Home Federal Savings & Loan. Date**

New bank information:

Best Hometown Bank address: 100 East Clay Street, Collinsville, IL 62234

Best Hometown Bank routing number: 281070914

Best Hometown Bank checking account number: _____

Please send me confirmation indicating when this change takes effect.

If you have any questions regarding this request please contact me.

Sincerely,

Customer Signature

Print Name

Account number w/payee

Address

City State Zip

Phone number Day/Evening



BEST HOMETOWN BANK

Internet Banking Signature Verification Form

Thank you for applying for the Best Hometown Bank Internet Banking Services.

TO ACTIVATE YOUR INTERNET BANKING SERVICES, PLEASE SIGN AND DATE THIS PAGE AND SEND IT VIA US MAIL, FAX OR IN PERSON TO ANY OF OUR 2 LOCATIONS. IF WE DO NOT RECEIVE THE SIGNATURE VERIFICATION PAGE WITHIN 30 DAYS OF APPLYING, YOU WILL NEED TO REAPPLY.

Upon receipt of the signature verification page, Best Hometown Bank will activate your access within 3 to 5 business days. At that time you can log into your messages and begin using our product.

Best Hometown Bank
Attn: Customer Service
100 East Clay Street
Collinsville, IL 62234
Phone: (618) 345-1121
Fax: (618) 345-4145

Best Hometown Bank
Attn: Customer Service
2110 North Center
Maryville, IL 62062
Phone: (618) 344-9650
Fax: (618) 344-9690

Customer Signature

Date

Member FDIC