



127 South Main St, Cambridge—www.cambridgestatebank.com— 763.689.2500—Member FDIC

## HEALTH SAVINGS ACCOUNT (HSA) CHECKLIST

Thank you for opening your Health Savings Account (HSA) with Cambridge State Bank. We have been serving our customer's financial needs for over 90 years. Your funds are secure and FDIC insured. To make your HSA opening as smooth as possible, complete the following checklist and include it with your application. If you have any questions or need additional information, please contact our HSA Specialist, Heather Williams at 763.689.2500.

Type of HSA:  Individual  Family

Ways to access your HSA, view and receive statements for your HSA, and contribute to your HSA.

- I would like Checks for my HSA (*\$12.00 for 25 duplicate checks and 10 deposit tickets OR \$16.00 for 50 duplicate checks and 20 deposit tickets*).
- I would like an Instant Cash & Check® Debit Card for my HSA (No Charge).
  - I would like an additional Instant Cash Debit Card see PART 4 of application. (Include \$5.00 per additional card)
- I would like to enroll in Online Banking (No Charge) (complete and return the Online Banking Access Agreement).
- I would like automatic transfers from another account to fund my HSA (complete the Automatic Transfer of Funds Authorization for Deposit Only).
- Please furnish my employer my HSA number for payroll deduction (for group employer openings only).

**Amount of Check Enclosed** \_\_\_\_\_

*The amount of the check must include the \$25 opening fee, a minimum contribution of \$50 to your HSA, and either \$12 for checks or \$16 for checks, and \$5.00 per each additional debit card, if applicable.*

Referred by: \_\_\_\_\_

**Forms Needed:**

- Copy of Driver's License or other Government Issued ID for Account Owner (REQUIRED) & Authorized Signer, (if applicable).**
- HSA Application (REQUIRED)**
- Authorization for Preauthorized Debit (if applicable)**
- Online Banking Access Agreement (if applicable)**

**HSA OWNER: PLEASE PRINT NAME** \_\_\_\_\_

**Return forms and check to:**  
HSA Processing  
Cambridge State Bank  
PO BOX 472  
Cambridge, MN 55008

FOR BANK USE ONLY		
Branch _____	Emp Initials _____	Rec'd by Ops _____
Ordered Checks _____	Ordered Card _____	Setup Online _____
HSA Acct # _____		