



AUTHORIZATION AGREEMENT FOR AUTOMATED TRANSFERS

Banterra Loan Servicing | P.O. Box 310 | Marion | Illinois | 62959

I (we) hereby authorize Banterra Bank, hereinafter called COMPANY, to initiate a DEBIT entry to my (our) account indicated below, at the depository financial institution named below, hereinafter called DEPOSITORY, to credit my account at Banterra Bank. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Complete this section for an automated payment TO a Banterra Loan account FROM an account at another depository institution or FROM your Banterra depository account.

Depository Name: _____ City: _____ State: _____

Type of Account: Checking Savings Routing/ABA: _____

Account Number: _____

Banterra Loan Account Number : _____

Frequency of Payment: Monthly Day of Month: _____

Other Please Specify: _____

Date of First Transfer: _____ Transfer Amount: _____

****Authorization must be received at least ten (10) business days prior to the first transfer.**

This authorization is to remain in full force and effect until COMPANY has received written notification of a change or of its termination from me (or either of us) in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it. Send written notification to your branch or the address above.

Name (please print): _____ Signature: _____

Address: _____ Date: _____

*Please mail this completed form along with a copy of a voided check to:
Banterra Bank, ATTN: Loan Servicing, P.O. Box 310, Marion, IL. 62959*

Electronic Banking Department Use Only

Rec'd By: _____

Date: _____

Prenote: _____

1st Transfer: _____