

## AUTHORIZATION FOR ELECTRONIC FUNDS TRANSFER TO LOAN

I authorize the Bank of Zachary to initiate entries to my checking/savings accounts. This authority will remain in effect until I notify you in writing to cancel it in such time as to afford the Bank of Zachary a reasonable opportunity to act on it. I can stop payment of any entry by notifying my financial institution 3 days before my account is charged. I can have the amount of an erroneous charge immediately credited to my account up to 15 days following issuance of my financial institutions statement or 60 days after posting, whichever occurs first.

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Names of Your Financial Institution

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Address of Financial Institution

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Signature

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Name-Please print

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Address-Please Print

Account Number to be Debited \_\_\_\_\_

Loan to be Credited \_\_\_\_\_

Loan Payment Amount \$ \_\_\_\_\_ Begin Date \_\_\_\_\_

Financial Institution Routing Number \_\_\_\_\_

PLEASE ATTACH A VOIDED CHECK TO THIS FORM