



AUTHORIZATION FOR EXTERNAL AUTOMATIC PAYMENT/TRANSFER

I hereby authorize Fidelity Bank & Trust to initiate electronic entries to my checking/savings account to make payments/transfers to the deposit account described below. The authority will remain in effect until the expiration date is reached (if provided) or I notify Fidelity Bank & Trust in writing to cancel the arrangement in such time as to afford Fidelity Bank & Trust a reasonable opportunity to act. I understand that my ability to stop payments authorized by this agreement and reverse erroneous charges shall be governed primarily by the terms and conditions of my account with the financial institution.

Check and complete the applicable information:

Type of transfer: Loan Payment Transfer to another account

- The payment/transfer amount of \$ _____ will charge/credit my
 Checking Savings Loan Account number _____ (UUFID ACCOUNT)
- Beginning on _____ and _____ thereafter.
(start date) (transfer frequency)

**I will notify Fidelity Bank & Trust – if the amount changes.*

DONOR BANK INFO

External Account Information

- Name on Account _____

(please enter the primary persons name listed on the account)
- Account Type Checking Savings Loan
- Name of Financial Institution _____
- Routing Number _____
- Account Number _____
- Signature _____ Date _____
- Bankers Name _____ Date _____

TERMINATION OF THIS AGREEMENT: Any one of you may cancel this agreement by giving us written notice. Your notice will be effective _____ (_____) days after we receive it.

Effective _____ (date) the undersigned cancels this Automatic Transfer Authorization.

Signed _____