



660 Central Avenue  
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**Get the service you deserve.**

## AUTOMATIC PAYMENT (ACH-AFT) AGREEMENT

Between The First State Bank and \_\_\_\_\_  
I hereby authorize The First State Bank to deduct the monthly payment for loan account # \_\_\_\_\_ from my deposit account # \_\_\_\_\_. My deposit account is located at the following institution \_\_\_\_\_, routing number \_\_\_\_\_. These deductions from my **Savings/Checking (please circle one)** account for my loan payments will commence on \_\_\_\_\_ and continue on the **1<sup>st</sup>, 5<sup>th</sup>, or 10<sup>th</sup> day (please circle one)** of each month until the principle and interest are paid in full, or I agree to terminate this agreement (10 days advance notice is required for termination). I understand that The First State Bank has the right to terminate this agreement with at least 30 days notice to me. If this agreement is terminated I agree to make regular monthly payments to The First State Bank.

**Optional:** Additional principal amount to be drafted \$ \_\_\_\_\_.

I hereby agree to the above terms and certify that I have right of withdrawal from the designated deposit account.

Account owner signature: \_\_\_\_\_ Date: \_\_\_\_\_

Account co-owner signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE ATTACH A VOIDED CHECK FOR THE DEPOSIT ACCOUNT TO BE DRAFTED.**

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### FOR INTERNAL USE ONLY

Bank to be charged \_\_\_\_\_

Loan # \_\_\_\_\_

ABA Routing # \_\_\_\_\_

Pmt Amt \$ \_\_\_\_\_

Deposit Account # \_\_\_\_\_

Due Date \_\_\_\_\_