1				S.S.N.	
Name on Account:				or	
				T.I.N.	
/we hereby authorize Fid described automatic transfering (and, erroneous credits/debits). The available for processing for any charges incurred a authorize comply with all a deffect until Fidelity State I dermination in such time and	er(s) for if necess I understage the transfers a resultant policable Bank & 1	the purpose(seary, electronand that I/we seaction and I/st of this tranlaws. Furthe	s) stated below onically credit, e are responsi /we hold Fide asaction. I/we armore, this au s received write	y from my accordeble for ensuring lity State Bank agree that AC thority is to retten notification.	count at the following account to correct g that adequate funds & Trust Co. harmless CH Transactions I/we main in full force and on from me/us of its
FOR AUTOMATIC LOAN	PAYMEN	T: (Only)			
Fidelity Loan Number:					
Automatic Loan Payment Fro	m Accour	nt #:			
Begin With Payment Due Dat	te: (MM/)	DD/YY)			
Frequency: (monthly, weekly,	etc)				
Payment Amount:					
OFFICE DISTANCE IN THE			ATION:		
Customer Name (Name as lis	ted on the				
Customer Name (Name as lis Institution Name:	ted on the	Address:			
Customer Name (Name as lis Institution Name: Telephone:	ted on the	Address: State:		Zip:	
Customer Name (Name as lis Institution Name: Telephone: City: Routing/Transit Number (A.)	B.A. numb	State:		Zip:	
Customer Name (Name as lis Institution Name: Telephone: City: Routing/Transit Number (A.) This account is a (CIRCLE (B.A. numb	State:	hecking	Zip:	Savings
Customer Name (Name as lis Institution Name: Telephone: City: Routing/Transit Number (A.) This account is a (CIRCLE (B.A. numb	State:	hecking		Savings
Customer Name (Name as lis Institution Name: Telephone: City: Routing/Transit Number (A.) This account is a (CIRCLE CACCOUNT Number:	B.A. numb	State: per). Cl	IZED SIGNAT	OR	
Customer Name (Name as lis Institution Name: Telephone: City: Routing/Transit Number (A.) This account is a (CIRCLE CACCOUNT Number:	B.A. numb	State: per). Cl		OR	Savings Date:
Customer Name (Name as lis Institution Name: Telephone: City: Routing/Transit Number (A.) This account is a (CIRCLE CACCOUNT Number: THIS FORM NOT VALID Print Name:	B.A. numb	State: per). Cl	IZED SIGNAT	OR	
Customer Name (Name as lis Institution Name: Telephone: City: Routing/Transit Number (A.) This account is a (CIRCLE CACCOUNT Number: THIS FORM NOT VALID Print Name:	B.A. numb	State: per). Cl	IZED SIGNAT	OR	
OTHER FINANCIAL INST Customer Name (Name as lis Institution Name: Telephone: City: Routing/Transit Number (A.) This account is a (CIRCLE CACCOUNT Number: THIS FORM NOT VALID Print Name: Signature:	B.A. numb	State: per). Cl	IZED SIGNAT	OR	
Customer Name (Name as lis Institution Name: Telephone: City: Routing/Transit Number (A.) This account is a (CIRCLE CACCOUNT Number: THIS FORM NOT VALID Print Name:	B.A. numb	State: per). Cl	IZED SIGNAT	OR	
Customer Name (Name as lis Institution Name: Telephone: City: Routing/Transit Number (A.) This account is a (CIRCLE CACCOUNT Number: THIS FORM NOT VALID Print Name:	B.A. numb	State: Der). Cl	ZED SIGNAT Print Name: Signature:	OR TURE(S):	
Customer Name (Name as lis Institution Name: Telephone: City: Routing/Transit Number (A.) This account is a (CIRCLE CACCOUNT Number: THIS FORM NOT VALID Print Name:	B.A. numb	State: Der). Cl	IZED SIGNAT	OR TURE(S):	

Bookkeeping dept.