

# KEYSTONE SAVINGS BANK

## ACH PAYMENT AUTHORIZATION

I (we) hereby authorize Keystone Savings Bank, hereinafter called BANK, to originate electronic transactions for me (us) for the purpose of applying periodic loan payments to my loan account or for applying periodic payments to another checking or savings account.

I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Payment Amount:	
	<input type="checkbox"/> Weekly <input type="checkbox"/> Bi Monthly <input type="checkbox"/> Monthly <input type="checkbox"/> Other: _____
Effective date:	
End date:	

**CREDIT:**

<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Loan																					
Financial Institution:																					
Account Name:																					
Account Number:	<table border="1" style="width: 100%; height: 15px;"> <tr> <td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td> </tr> </table>																				
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**DEBIT:**

<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Loan																					
Financial Institution:																					
Account Name:																					
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This authorization is to remain in full force and effect until KEYSTONE SAVINGS BANK has received written notification from me (or either of us) of its termination in such time and in such manner as to afford BANK a reasonable opportunity to act on it.

Name(s) \_\_\_\_\_  
(Please Print)

Signature (s) \_\_\_\_\_

Date \_\_\_\_\_