COMMUNITY PARTNERS SB

- **Corporate Office** | 1419 W Main St, Salem, IL 62881
- **First Pekin Savings Bank** | 532 Court St, Pekin, IL 61554 • 347-3106 • firstpekinsavings.com
- **Flora Savings Bank** | 128 W Second St, Flora, IL 62839 • 662-2177 • florasavings.com
- **Marion County Savings Bank** | 301 W Main St, Salem, IL 62881 • 548-3440 • marioncountysavings.com

Automatic Loan Payment Authorization

We can set up an automatic loan payment from any deposit account you have with Community Partners SB to any loan you have with Community Partners SB.

Complete the details below, sign, date, and return this form.

Member FDIC

Payment Amount $_____

From my CPSB deposit account #_____

To my CPSB loan account #_____

My first payment will begin on _____ and reoccur monthly on this same date*.

* If the scheduled transfer date falls on a non-business day, such as a weekend or holiday, then the payment will be transferred on the business day prior to the scheduled transfer date.

By signing below, you are authorizing us to set up an automatic loan payment using the above details and you agree to the terms and conditions of this agreement.

_____ _____ _____ *Account Holder*

Signature *Account Holder Printed Name* *Date*

Generally – In this authorization, the terms "we," "our," "us," or "CPSB" refer to Community Partners SB and the terms "you" or "your" refer to the Account Holder(s). The accounts listed above are covered by their individual terms and conditions, unless modified by this Authorization. If a transfer is made from a savings account, we reserve the right to require not less than 7 days written notice of withdrawal.

You agree to keep enough money in your deposit account to cover the transfer(s) you requested by this Authorization. If your deposit account balance is insufficient to cover the transfers you authorize, we may cancel this Authorization immediately without notice. We may use our rights and remedies under applicable law and our rules and regulations governing these types of accounts. These may include returning your checks or drafts unpaid and closing your account(s) by mailing a proper notice to you with a check or draft equal to the balance in the account.

You agree, in consideration of this service rendered by us, to indemnify (repay us for any loss) and hold us harmless (release us from any responsibility) from any liability or loss occurring due to the dishonor of any check or draft presented which results from any charge made or refused to be made by us under this Authorization. You agree to abide by our rules and regulations governing your account(s) as stated on your account agreement and as amended from time to time. We may take any security measures that we believe are necessary without notice to you unless notice by applicable law or regulation is required.

Loan Payment Authorization – You agree, for the loan account(s) listed above, that we may continue to charge the deposit account until the loan is paid or until you provide us with written notice of cancellation. Your final loan payment will not be made via ACH transfer. You will need to contact Community Partners SB for the final payoff amount. Your final payment can be made by mail or in person.

If your deposit account does not have a sufficient balance on a day that a payment is to be transferred, we may stop further efforts to transfer your payment and ask you to make your payment and all subsequent payments by other means until all payments under the loan are current. We will not use the availability of any credit line that you may have with us in determining whether your deposit account has a sufficient balance. At our option and discretion, we may resume charging the deposit account without further instruction from you once all payments are current. If we do not resume charging your deposit account, we will notify you in writing that we have cancelled this Authorization. Cancellation of this Authorization does not excuse you from making timely payment under the terms of the loan.

Amendments and Termination – We will give you reasonable notice when we amend this Authorization. If this Authorization needs to be amended because of a change in State or Federal law, the change shall be effective immediately without notice or after any notice required by law or regulation. If no termination date is specified below, this Authorization will remain in effect until terminated by any one of you. We may terminate this Authorization by giving you written notice at the address we have on file for you. Any notice will be effective immediately when mailed or delivered by us. Notice to any one of you is notice to all of you.

Automatic Loan Payment Termination

Any one of you may cancel this agreement by giving us written notice at the Community Partners SB address shown above.

By signing below, you are authorizing us to terminate this Automatic Loan Payment Authorization.

_____ _____

Signature Date

For Bank Use Only *Date Received*_____ *Date Setup Completed*_____ *Processed By*_____