

# AUTHORIZATION OF AGREEMENT

**GENERALLY** - The accounts listed on page one 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 Debited Account to cover the transfers you request by the Authorization. If your Debited 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 a 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 (such as recording telephone transfer conversations) without notice to you.

**LOAN PAYMENT AUTHORIZATION** - If your Credited Account listed on page one is a debt you owe us (e.g. a mortgage or installment loan), then you agree that we may continue to charge the Debited Account until the loan is paid or until you provide us with written notice of cancellation.

If your Debited Account does not have a sufficient balance on a day that a payment is to be debited, we may stop further efforts to debit your Debited Account and ask you for the payment and all subsequent payments 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 Debited Account has a sufficient balance. At our option and discretion, we may resume charging the Debited Account without further instruction from you once all payments are current. If we do not resume charging your Debited 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. If no termination date is specified on page one, 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 stated on page one. 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 SERVICE FROM UNITED BANK

MEMBER  
FDIC



## 3 CONVENIENT WAYS TO ENROLL!

1. Sign up online at  
[www.unitedbankofunion.com](http://www.unitedbankofunion.com)

2. Mail in the form below

3. Call 636-583-2555

*Making life a little easier...*

THIS SERVICE IS  
COMPLETELY FREE!

Enroll today for United Bank of Union's  
Automatic Loan Payment Service.  
This new and convenient service is  
the easiest way yet to make a payment.



Tear below here if enrolling by mail.

ENROLL ME IN THE FREE AUTOMATIC LOAN PAYMENT SERVICE

To enroll by mail, send this form and a voided check or an  
encoded savings withdrawal slip to:

UNITED BANK OF UNION  
ATTN: LOAN SERVICE DEPT.  
P.O. BOX 500  
UNION, MO 63084

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Loan Account Number: \_\_\_\_\_

(If Loan Account Number is unknown, please call (636) 583-2555 for assistance.)

### Account Debiting

Checking     Savings    Name of Financial Institution of Account: \_\_\_\_\_

Checking Account #: \_\_\_\_\_    Withdrawn Amount: \_\_\_\_\_

Routing #: \_\_\_\_\_    Day of the Month for Withdrawal: \_\_\_\_\_

I understand that my monthly payments will be automatically withdrawn from the account presented on this form, and I've enclosed a voided personal check or an encoded savings withdrawal slip (sorry no temporary checks can be accepted). I have read the United Bank of Union Automatic Loan Payment Service Agreement on the reverse side of this document and, upon approval, agree to be bound as specified therein.

Signature: \_\_\_\_\_    Date: \_\_\_\_\_