

You may complete
this form on line
before printing.



AUTHORIZATION FOR DIRECT DEBIT OF FUNDS FOR LOAN PAYMENT

1. Authorization

I request and authorize Glenview State Bank to draw by electronic funds transfer from the bank account named on the reverse, all payments due on the loan until such time the obligation is paid in full, or until Glenview State Bank receives written notice of revocation of Borrower's authorization in the manner specified in paragraph 3.

2. Insufficient Funds

Borrower agrees that if the Account does not have sufficient funds on the day Glenview State Bank attempts to deduct the payment, that a deduction shall not be made. Glenview State Bank may attempt, but shall have no further obligation to continue to attempt to deduct the payment amount from the Account. Until such time that payment is made, Borrower shall be responsible to make such payment and any other payments that may be due on the Obligation. Borrower agrees that if the deduction is not made due to insufficient funds on three (3) occasions, **Glenview State Bank has the right to terminate this agreement upon receipt of the 3rd occasion WITHOUT written notification to the Borrower.**

3. Borrower Revocation

The Borrower may revoke this authorization at any time by delivering a written notice to Glenview State Bank, and such notice shall be effective three (3) days after receipt.

4. Glenview State Bank Revocation

Glenview State Bank may revoke this authorization at any time by delivering a written notice to the Borrower, and such notice shall be effective immediately.

The Borrower understands that this Authorization to charge the Borrower's Account is not a condition for granting credit to Borrower and is being granted solely at Borrower's option. Do not hesitate to contact us at 847-729-1900 if you have any questions or require any further information.

Mail completed form to:
 GLENVIEW STATE BANK
 ATTN: LOAN SERVICING
 800 WAUKEGAN ROAD
 GLENVIEW IL 60025 or FAX to (847) 832-0345

ACCOUNT INFORMATION

Name of Borrower			
GSB Loan Type	Auto or Personal	Home Equity Line of Credit	Mortgage
GSB Loan Number			
Regular payment Amount	\$	Monthly payment Deduct \$50 annual fee*	\$
Additional amount applied to principal each month (Optional)	\$	\$	\$
	Initial Authorization		Change Authorization <i>(changing account/bank from existing direct debit)</i>
Bank Name:			
Bank Address:			
Bank Phone No.			
Name on Account			
Account Type	Checking	Savings	
Account Number			
Bank ABA#			

- Borrower acknowledges that borrower has read, understands and agrees to the terms and conditions of this authorization.
- Borrower acknowledges receipt of an exact copy of this authorization.
- Borrower represents and warrants that borrower is legally authorized to use the bank account entered on the Glenview State Bank "Authorization for Direct Debit of Funds for Loan Payment" form and authorizes us to store that banking information for this service.

_____	_____
Signature of Borrower	Date
_____	_____
Account Owner Signature (if different than Borrower)	Date

* If not selected annual fee will be charged to your line of credit.

FOR BANK USE ONLY

Payment Effective Date: _____
Entered by _____ Edited by _____



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