

AUTOMATIC LOAN PAYMENT FORM

☐ NEW TRANSFER	CHANGE TO CU	JRRENT TRANSFI	ER		
Borrower Name		Social Security #			
			Social Security #		
Loan # to be credited			•		
Regular Payment Amount					
		Amount to extra principal (if applicable) \$			
Automatic Payment Start I					
·					
Payment to occur:	Monthly Weekly	Other (pl	ease specifiy)		
*Please note FHLB loans	cannot apply partial pays	ments	•		
INTERNAL ACCOUNT					
Account #		Account Type			
Bank Name Routing # Account # Account Type Borrower Signature					
Co-Borrower Signature		 Date	Date		
I/We authorize Lender and the fine effect until I notify you in writing of any entry by notifying my finance to my account up to 15 days follow **A fee of \$30.00 shall be Return form to: BANK 409 Hy Wapello	to cancel it in such time as to affor ial institution 3 days before my acc ving issuance of my statement or 60 ccharged for any loan pay	rd the financial institution count is charged. I can have I days after posting, whiche	a reasonable opportunity to ac the amount of an erroneous co ever occurs first.	rt on it. I can stop payment harge immediately credited	
Internal checklist: Accepted by		Form to YLR Sca	nned		
WEST DES MOINES 270 S. 68th Street West Des Moines, IA 50266	MORNING SUN 509 S. Main St. Morning Sun, IA 52640	WAPELLO 409 Hwy 61 S. Wapello, IA 52653	MEDIAPOLIS 527 Main St. Mediapolis, IA 52637	BURLINGTON 1403 S. Roosevelt Ave Burlington, IA 52601	