



GREENFIELD SAVINGS BANK

 EQUAL HOUSING LENDER ■ MEMBER FDIC ■ MEMBER DIF

Authorization Agreement for Preauthorized Loan Payments from other Institutions

I/we hereby authorize Greenfield Savings Bank, hereinafter called Bank, to initiate debit entries to my/our Checking account indicated below and the depository named below, hereinafter called DEPOSITORY, to debit same to such account. The purpose of such debit shall be to make payment to Greenfield Savings Bank for the loan referenced below.

Depository Bank Information

Name of Financial Institution _____ Branch _____

City _____ State _____ Zip Code _____

Routing Transit/ABA # _____ Account # _____

Automatic Transfer Information

Amount of Transfer \$ _____ Additional to Principal (if applicable): \$ _____

Beginning Date: _____ Termination Date (if applicable): _____

Please attached a voided check from the above account here

Authorization

This authority is to remain in full force and effect until BANK and DEPOSITORY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford BANK and DEPOSITORY a reasonable opportunity to act on it.

CHECKING ACCOUNT OWNER(S) _____

GREENFIELD SAVINGS BANK LOAN # _____

AUTHORIZED SIGNATURE _____ DATE _____