



**Submit To:** Your Local Branch **or** Summit National Bank  
19 Montana Ave  
Laurel, MT 59044  
Fax (855) 628-7920

## Automatic Funds Transfer Authorization

### From Debited Account

Account Type:  Checking  Savings  
Name on Account: \_\_\_\_\_  
Account Number: \_\_\_\_\_

### To Credited Account

Account Type:  Checking  Loan  Savings  
Name on Account: \_\_\_\_\_  
Account Number: \_\_\_\_\_

### Periodic Transfers

I authorize Summit National Bank to transfer funds from my Debited Account to my Credited Account.  
Amount to be transferred: \_\_\_\_\_  
Effective Date: \_\_\_\_\_  
Termination Date: \_\_\_\_\_  
Frequency:  Weekly  Monthly

### Maintenance Transfer of Funds

I authorize Summit National Bank to charge my Debited Account when the account balance of my Credited Account falls below the specified minimum and to transfer and deposit these funds into my Credited Account. The amount charged and transferred shall equal the amount necessary to raise the balance of my Credited Account to equal or exceed the minimum balance requested.  
Minimum Account Balance: \_\_\_\_\_  
If funds are not available to fulfill the minimum balance: (check one)  
 All available funds are to be transferred.  
 No funds are to be transferred.  
Charge per transfer: \$3.00

### Insufficient Funds Transfer

I authorize Summit National Bank to charge my Debited Account and to transfer and deposit money into my Credited Account to cover each overdraft in my Credited Account.  
Transfers will be made in multiples of: \_\_\_\_\_  
Charge per transfer: \$3.00

**Transfer Date Processing**

If a transfer date is a non-processing day then the transfer will be made on the first processing day before the scheduled transfer date.

**Termination of This Agreement**

This agreement may be canceled by providing written notice to Summit National Bank. The notice will be effective within 5 business days after receiving your request.

You agree to keep enough money in your Debited Account to cover the transfers you request by this Authorization. If your Debited Account balance is insufficient to cover the transfers you have authorized, 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 your 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 (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 load 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, this Authorization will remain in effect until terminated by you. We may terminate this Authorization by giving you written notice at the address on your account. Any notice will be effective immediately when mailed or delivered by us. Notice to any person listed on the account is notice to all persons listed on the account.

**By signing below, I agree to all the terms and conditions of this authorization.**

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**Account Holder Signature**

**Date**