



HERE YESTERDAY, HERE TOMORROW.

AUTOMATIC TRANSFER OF FUNDS AUTHORIZATION
Internal Transfers

Account Holder Information	
Name	
Address	
City, State, Zip	

Payment/Frequency Information		
Date To Establish Transfer ____/____/____	Debit Account _____ Credit Account _____ Dollar Amount _____	Compound <input type="checkbox"/> Internal Transfer <input type="checkbox"/> Interest Check <input type="checkbox"/> Interest Transfer <input type="checkbox"/> <i>Internal Use Only</i> Submitted By _____ FM Teller _____ Record # _____
<u>Frequency</u> <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Semi-Monthly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Annually		

Authorization	
Until this authorization is revoked in writing by me (either of us), I (we) hereby authorize Lisle Savings Bank to transfer funds between the above reference accounts that I (we) have legal withdrawal or access rights. The undersigned shall have the sole responsibility for maintaining such withdrawal or access rights and agrees to hold Lisle Savings Bank harmless for any refusal to make a transfer pursuant to these instructions. I (we) further agree that any such transfer of funds pursuant to these instructions shall be at the sole risk of the undersigned until such time as this written authorization to make such transfers is revoked by me (us) in writing. It is further understood that Lisle Savings Bank will automatically transfer the dollar amount designated above on the established date provided there is a sufficient available balance in the transfer debit account. If there is not a sufficient available balance at the time of the transfer date, the transfer will be made at the first available date.	
Signature	Date
Signature	Date

Termination	
I (we) hereby terminate this authorization for transfer of funds described above.	
Signature	Date
Signature	Date