



IMPORTANT - ACTION REQUIRED

Agreement for Direct Payments (ACH Debits)

This form must be completed, signed and returned to Farm Bureau Bank FSB before your automatic payment request is activated.

Authorization

I (we) hereby authorize Farm Bureau Bank to initiate the following debit entries to my (our) bank account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

This automatic payment method will be effective on your next payment due date, after receipt of the completed document.
(Allow up to 15 days prior to due date for set up and activation)

Transfer Type: **Recurring Transfer** - Transfer \$ _____ monthly on the _____ day of the month
beginning on _____

One-Time Transfer - \$ _____ For this type of transfer, I understand there is a \$5.00 fee per transaction except for funds used in account activations.

From:

This is the bank from where the payment will be withdrawn.

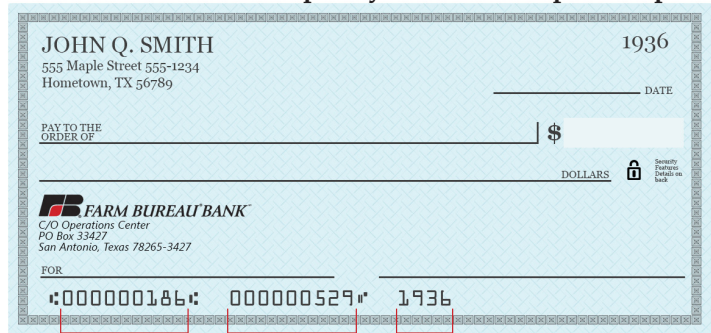
Account Type: Checking Savings

Bank Name: _____

Routing #: _____

Account #: _____

Do Not Use Temporary Checks or Deposit Slips.



IMPORTANT: Please verify with your banking institution that the account and routing numbers above are correct and eligible for automatic debits.

To:

Account Type: Checking Savings Installment Loan

Bank Name: _____ Routing #: _____

Account #: _____

This authorization is to remain in full force and effect until I (or either or us) give mailed, faxed, phone, or e-mail notification of its termination in such time and in such manner as to afford Farm Bureau Bank reasonable opportunity to act on it.

Loans: Farm Bureau Bank reserves the right to cancel any automatic payment method upon consecutive returned payments. If your payment is not made via ACH, your Annual Percentage Rate (APR) will increase as noted in your loan agreement. You are responsible for making the payments by the due date, as disclosed in your loan agreement.

Deposits: If we initiate an ACH debit on your behalf for credit to your account with us, the funds may not be available for withdrawal until the 3rd business day following the transaction date. Requests must be processed before 3:00 p.m. (CT) to be included in the current business day.

Signature of Primary Account Holder Date

Printed Name of Primary Account Holder

Signature of Secondary Account Holder Date

Printed Name of Secondary Account Holder

Print and Fax/Mail completed form to:

Farm Bureau Bank FSB
P.O. Box 33427
San Antonio, TX 78265-3427
Phone: 800.492.3276
Fax: 866.913.5087
E-mail: services@farmbureaubank.com