



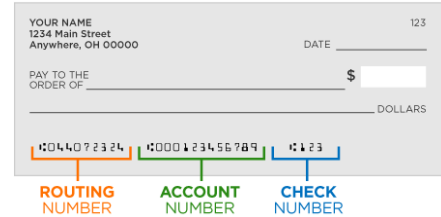
Heartland Co-op Automatic Bill Payment

Automatic bill payment is available at Heartland Co-op. The electronic funds transfer payment plan is a convenient way to pay your cooperative bill. Simply authorize payment to Heartland Co-op and your bank will automatically withdraw your monthly payment from your checking or savings account. You save time, effort, and postage.

How does it work? On the 25th of each month (or the next banking day), we notify your bank or financial institution of the amount to be transferred from your account to pay your cooperative bill. The deduction will show up on your regular bank statement.

How do I sign up? Complete and sign the authorization form below and mail it or bring it into one of our locations. You will need to include a voided check or deposit slip as well. Mail to:

Heartland Co-op
P.O. Box 71399
Des Moines, IA 50325-0399



Customer Name		
Address		
City	State	Zip Code
Heartland Co-op Account Number(s)		Telephone Number
I/We hereby authorize Heartland Co-op to initiate debit entries to my/our (select one of the following)		
<input type="checkbox"/> Checking		
<input type="checkbox"/> Savings		
account in the financial institution (Bank) named below. I/We further authorize Bank to debit such entries to my/our account:		
Depository Name (Bank)		Branch
Address		
	State	Zip Code
ABA Routing Number		Bank Account Number
Bank Telephone Number		Account Type
The total amount of bill due from the prior month will be deducted from your account unless other arrangements have been made with the Credit Manager at Heartland Co-op.		
The authority will remain in effect until written notice from me (or either of us) of its termination in such time and in such manner to afford Heartland Co-op a reasonable opportunity to act on it. Customer assumes responsibility for erroneous information provided in the authorization. Further, I understand that Heartland Co-op may, at their discretion, void this agreement if sufficient funds are not available in my account to pay debit and that my account will be charged a \$20 service fee for such transaction.		

Authorized this _____ Day of _____ Year _____

Printed Name	Co-applicant Printed Name
Signature	Signature

Please allow 2 – 3 weeks for processing.