

**AUTHORIZATION AGREEMENT FOR AUTOMATED ENTRIES**

Better Banks, 10225 N. Knoxville, Peoria, IL 61615  
Better Banks, 5600 SW Adams, Bartonville, IL 61607  
Better Banks, 1204 W. Garfield, Bartonville, IL 61607  
Better Banks, 201 2<sup>nd</sup> Street, Dunlap, IL 61525  
ABA 071120207 and Tax# 37-0253320

I (we) hereby authorize Better Banks, hereinafter called COMPANY, to initiate debit or credit entries to my (our) Checking  Savings  account (select one) indicated below and the depository named below hereinafter called FINANCIAL INSTITUTION, to debit or credit same to such account. I (we) acknowledge the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

FINANCIAL INSTITUTION to DEBIT \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TRANSIT/ABA # \_\_\_\_\_ ACCOUNT# \_\_\_\_\_

AMOUNT: **EXACT AMOUNT OF BILL** START DATE FOR DEBIT \_\_\_\_\_

DAY OF MONTH: \_\_\_\_\_ **20<sup>TH</sup>** FREQUENCY: \_\_\_\_\_ **ONCE PER MONTH**

FINANCIAL INSTITUTION to CREDIT BETTER BANKS – BARTONVILLE BANK

CITY BARTONVILLE STATE IL ZIP 61607

TRANSIT/ABA # 071120207 ACCOUNT# \_\_\_\_\_

AMOUNT: **EXACT AMOUNT OF BILL** START DATE FOR CREDIT \_\_\_\_\_

DAY OF MONTH: \_\_\_\_\_ **20<sup>TH</sup>** FREQUENCY: \_\_\_\_\_ **ONCE PER MONTH**

**CITY OF MARQUETTE HEIGHTS WATER PAYMENT**

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

NAME(S) \_\_\_\_\_

ADDRESS \_\_\_\_\_ ACCT# \_\_\_\_\_

DATE \_\_\_\_\_ SIGNED \_\_\_\_\_



Bank Employee Acknowledgement \_\_\_\_\_ Date \_\_\_\_\_

Entered and Verified at \_\_\_\_\_