

**Capital Farm Credit, ACA  
Ag Banking Online Electronic Funds Transfer  
Authorization and Agreement  
For Deposits and Withdrawals  
(ACH Debits/Credits)**

**Borrower Name(s):** \_\_\_\_\_

**Loan Numbers:** \_\_\_\_\_

**Funds Held Account Numbers (if applicable):** \_\_\_\_\_

**BANK INFORMATION OR ATTACH VOIDED CHECK HERE**

Name on account as it appears  
at Financial Institution: \_\_\_\_\_

Financial Institution Name: \_\_\_\_\_

Financial Institution Routing #: \_\_\_\_\_

Checking account #: \_\_\_\_\_

or

Savings account #: \_\_\_\_\_

This is to certify that I/we authorize and direct the Association to make/receive electronic transfers from/to Loan, Funds Held, and Advance Conditional Payment Accounts listed above (the "Accounts") from/to my/our commercial bank account as indicated above, (including any adjustments for entries made in error). This authorization applies only to transfers to and from the Bank and the Accounts specified above. All electronic transfers under this Agreement are also subject to Association policies and procedures and the general terms and conditions of the Loan, Funds Held Account and Advance Conditional Payment Account agreements establishing the Accounts listed above. If applicable, I/we expressly acknowledge the security procedures offered by Association in connection with electronic transfers and hereby accept and agree to be bound by these security procedures. I/we further agree that all transfers requested will be for the business or agricultural purposes described in my/our loan application.

I/we jointly and severally accept responsibility for all electronic fund transfers made pursuant to this Agreement. If applicable, I/we agree to pay the charges associated with the electronic funds transfers, which are described by the Association and authorize the Association to add the charges to the principal balance outstanding under my/our Loan, Funds Held, or Advance Conditional Payment Accounts. I/we further understand that these fees may change from time to time and that the Association will make available a revised fee schedule to reflect the changes in the electronic transfer fees.

This Agreement is effective upon the date shown below, and except as provided below, shall remain in effect for the term of the Loan and will apply to all modifications, replacements, substitutions, extensions and renewals of the Loan. This Agreement may, however, be revoked by me/us at any time by written notice signed by all Borrower(s) and delivered to the Association at its office in which the Loan was made. I/we further understand and agree that the Association may terminate this Agreement at any time by written notice addressed to me/us at my/our address (es) on file in the Association's office.

Please mail this form and your voided check to Capital Farm Credit, Attn: Treasury Services Dept., PO Box 6520, Lubbock, TX 79493

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Internal Use Only:**

Account to Account Internal Transfers Approval \_\_\_\_\_

Loan and/or Funds Held Disbursement Approval \_\_\_\_\_

Loan Officer Signature \_\_\_\_\_ Date \_\_\_\_\_