



Loan Administration

114 E. Jackson Street • Clinton, KY 42031
270.653.4301 • 800.653.4301
fcbheartland.com

Automatic Debit Form

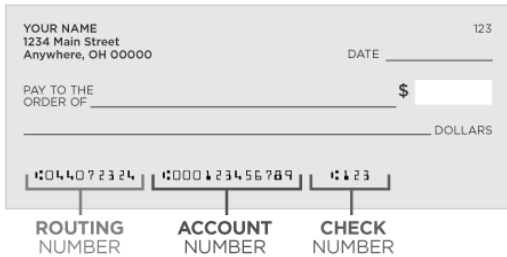
I authorize First Community Bank of the Heartland (FCB) to initiate an automatic withdrawal in the amount of \$ _____ to be charged to my _____ DDA _____ SAV account # _____ at the following institution:

Financial Institution _____

Address _____

ABA Routing # _____ Account Number _____

and credit to my loan # _____ (loan # located on your Welcome Letter) at First Community Bank.



Account Holder's Name _____

Date of first withdrawal _____

Frequency _____

I acknowledge the origination of the ACH transaction to my account must comply with the provisions of U.S. law and will remain in effect until FCB has received written notification from me of its termination and in such time and manner as to afford FCB with a reasonable opportunity to act upon it.

Customer Name (please print) _____

Customer Signature _____

Date _____ Customer SSN _____

You can submit this completed form to FCB by:

1. Emailing to here2help@fcbheartland.com
2. Faxing to 270.653.2003
3. Mailing to the address listed above, along with a voided check.