



First National Bank North
P.O. Box 520
Walker, MN 56484

Authorization Agreement for ACH/Transfer Transactions

I (we) hereby authorize First National Bank North to initiate **debit/credit** entries to my (our) account(s) held at First National Bank North, and **debit/credit** the account at the financial institution indicated below. I (we) further authorize adjusting entries (reversals) to correct errors, if any. I (we) agree that I (we) shall indemnify and hold harmless First National Bank North from and against any and all claims, demands, losses, causes of action, and liability from this authorization. This authority will remain in effect until I (or either of us) notify the bank in writing at least **5 banking days** prior to the next settlement date. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law. I (we) agree to be bound by NACHA Operating Rules. I (we) acknowledge First National Bank North has the right to audit my compliance with NACHA Operating Rules and terminate or suspend this agreement for breach of NACHA Operating Rules.

New Transfer **Change to an existing ACH/Transfer**

FNBN Account Holder Information			
Customer Name	Individual ID Number		
Account Number			
Personal or Business	<input type="checkbox"/> Personal Account <input type="checkbox"/> Business Account		
Account Type	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Loan		
Debit/Credit	<input type="checkbox"/> Debit <input type="checkbox"/> Credit		
Account Holder Information ACH/Transfer going to/coming from			
Customer Name	Financial Institution	Individual ID Number	
Routing Number		Account Number	
Personal or Business	<input type="checkbox"/> Personal Account <input type="checkbox"/> Business Account		
Account Type	<input type="checkbox"/> Checking <input type="checkbox"/> Savings		
Debit/Credit	<input type="checkbox"/> Debit <input type="checkbox"/> Credit		
Transfer Information			
Amount	Frequency of Transfer	Start Date/Day of Transfer	
If this date falls on a Saturday, Sunday, or bank holiday, this transfer will automatically be made on the following business day. First National Bank North will make every effort to complete this transfer unless circumstances beyond our control prevent the transfer, despite reasonable precautions that we have taken. All terms and conditions of your account agreement apply to this agreement.			
Customer Authorization			
SIGNATURE OF FNBN CUSTOMER	PRINTED NAME	DATE	
TWO PARTY TRANSFER			
SIGNATURE OF 2ND PARTY	PRINTED NAME	DATE	
Employee Name		Date Form Received	
TERMINATE			
SIGNATURE	DATE	PRINTED NAME	EFFECTIVE DATE